## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997

appears in Block 12 or B

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P96000030988 (5)

GRAND TITLE SEARCH AND ABSTRACT SERVICES. INC.

Principal Place of Business Mailing Address						# (####00)				
							- 100(100(100 100 100) \$100 2000 2000 2000 3000 3000 3000 3000 3			
5525 PALMETTO ST. FT. MYERS BEACH FL 33931		5525 PALMETTO ST. FT. MYERS BEACH FL 33931-4137								
						•	3. Date Incorporated or Qualified 04/09/1996	3a. Da	ate of Last I	Report
2. Principal	Place of Business	2a. Ma 26	iling Address				4. FEI Number 65-0666130	2		pplied For lot Applicable
Suite. Apt. #, etc.  22  City & State.  23		Suite, Apt. #, etc. 27  City & State 28					5. Certificate of Status Desired			
7ip Country 24 25				<b>⊢</b> ¬	Country		8. This corporation has liability for intangible tax under s. 199.032, Fiorida Statutes			
<del></del>	9. Name and Address of Curre		d Agent	1001			10, Name and Address of New Re			
CHI	ENKO, WILLIAM E JR		<u></u>		ii]	Name			<del></del>	
2801 ESTERO BLVD.				E	12	Street Addre	Address (P.O. Box Number is Not Acceptable)			
SUITE C FORT MYERS BEACH FL 33931			8	3						
				8	14	City	AND THE RESERVE OF THE PROPERTY OF THE PROPERT	FL	<b>85</b> Zip	Code
11. Pursuari office or agent 1 SIGNATURE	rregistered agent, or both, in the Stat am familiar with, and accept the obli	te of Florida. S gations of, Se	Such change was ction 607.0505, F	authorized lorida Statul	by tes	the corporati	oration submits this statement for the pon's board of directors. I hereby accepted when reinstating)	ourpose of ot the app	changing ointment as	its registered s registered
12.		ND DIRECTO		13.	.90	in ag accordance	ADDITIONS/CHANGES TO OFFI		DIRECTO	RS IN 12
1F1E	D	TID DIVLOTO	DELETE	1.1 TITL	F	T	71001107010110101010101011	OLITO FILL	Change	Addition
NAME	GRIMES, LORI D			1.2 NAM						
STREET ADDRESS	COAS BALLIFTTO OT					ADDRESS	•			
	FT. MYERS BEACH FL 33931									
CITY-ST-7IP TITLE	D		DELETE	1.4 C(TY 2.1 T(T)	_	1-217			Change	☐ Addition
}	ANDERSON, ANDY S		otter	2.2 NAM					La Chango	/ 100 (100)
NAME	SEAR DALLETTA AT			1		1000000				
STREET ADDRESS	FT. MYERS BEACH FL 33931					ADORESS				
CHY-ST-ZIF	FI. MIENS DEACH IL 33931		DELETE	2 4 CIT 31 TITL		S1-ZIP			Change	Addition
[			Las Decere	32 NAM					- Sucudo	- Toomon
NAME DESCRIPTION	, [					ADDOLOG				
STREET ADDRESS	`			1		ADDRESS	•			
CITY-ST-ZIF TOTLE			DELETE	3.4. CIT		ol-ZiP		·	☐ Change	Addition
1			E DECENE	1		ľ			L orange	Manifoli)
NAME				4. 2 NA						
STREET ADDRESS						ADDRESS				
CHY-SI-ZIP			DELETE	4.4 CITY		T-21P			Channe	Addison
1171.6			DELETE	5.1 TITL		ľ			Change	Addition
NAME				5.2 NAM						
STREET ADDRESS	5			5.3 STRI	EET	AODRESS				
C-TY - ST - ZIP				5.4 CITY		T-ZIP			<del></del>	
THTLE			DELETE	6.1 TITL	E				☐ Change	Addition
NAM č				6.2 NAM	1E					
STREET ADDRESS	\$			6,3 STR	EET	ADDRESS				

6.4 CITY-ST-ZIP 14. I do hereby certify that the Mormation supplied with this fiting does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this immual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or directorio it is corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 or Block 13 if changed, or on an attachment with an address.