


FILED
May 02 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000034522 (8)
1. Corporation Name
LYNN SNYDER & ASSOC., INC.

Principal Place of Business
8532 S.W. 1ST COURT
CORAL SPRINGS FL 33071

Mailing Address
8532 S.W. 1ST COURT
CORAL SPRINGS FL 33071-7386

2. Principal Place of Business
21 6630 STRATFORD DR
22 Suite, Apt. #, etc.
23 City & State
24 33067
25 BROWARD

2a. Mailing Address
26 6630 STRATFORD DR
27 Suite, Apt. #, etc.
28 City & State
29 33067
30 BROWARD

3. Date Incorporated or Qualified
04/17/1986

3a. Date of Last Report

4. FEI Number
65-0664710

Applied For
Not Applicable

5. Certificate of Status Desired
\$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution
\$5.00 May Be Added to Fees

7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
Yes No

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
Yes No

9. Name and Address of Current Registered Agent
ASTERN, CHERYL
6630 STRATFORD DRIVE
PARKLAND FL 33067

10. Name and Address of New Registered Agent

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual 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 director of the 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 13 if changed, or on an attachment with an address.

SIGNATURE CHERYL ASTERN Cheryl Astern 4/11/97

12. OFFICERS AND DIRECTORS
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
1.5 CITY-ST-ZIP
1.6 CITY-ST-ZIP
1.7 CITY-ST-ZIP
1.8 CITY-ST-ZIP
1.9 CITY-ST-ZIP
1.10 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
1.5 CITY-ST-ZIP
1.6 CITY-ST-ZIP
1.7 CITY-ST-ZIP
1.8 CITY-ST-ZIP
1.9 CITY-ST-ZIP
1.10 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual 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 director of the 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 13 if changed, or on an attachment with an address.

SIGNATURE: Cheryl Astern CHERYL ASTERN 4/11/97 954-346-6414