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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Apr 23 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000041561 (7)

Principal Place of Business	Mailing Address			
2024-04/16-04/0 FT-CAUCHORIE #1-53312	FT LAUDERDALE EL ROSIE	2.2834		<b>B</b>
			3. Date incorporated or Qualified 05/03/1996	3a. Date of Last Report
Principal Place of Business	2a. Mailing Address	A	4. FEI Number	Applied For
J8225 MIDNIGHT PAS		ONIGHT PASS	65-066120	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State  SANASOTA FL	City & State  SANASOTA	FC	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country WSA 25 USA	Zip	Country 30 USA	8. This corporation has liability for i	intangible tax under s. 199.032,
9. Name and Address of Cur			10. Name and Address of New Re	gistered Agent
- WILLIAMO, J		81 Name	BRIAN AHERN	
-8001 DAVIE BLVD		B2 Street Add	dress (P.O. Box Number is Not Acceptab	ole)
-FT-LAUDERDALE-FL-93812		8	press (P.O. Box Number is Not Acceptable 225 MION/641 P.	45S
		(83)		
·		City S	0.010.00	85 Zip Code
$\mathcal{A}$	- A-A	- P1	ARASOTA	FL 124247
			rporation submits this statement for the p	ourpose of changing its registered
<ol> <li>Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Stagent. I am amiliar with and accept the ob</li> </ol>	ate of forida. Such change was a ligations of Section 607.0505, Flo	authorized by the corpora orida Statutes.	ation's board of directors. I hereby accep	st the appointment as registered
SIGNATURE SIGNATURE OF THE OF	artent and title if any exable (NOTE	E: Registered Agent signature requ	uired when reinstating)	4/17/9/
SIGNATURE Signature / read printed harme of registrated 12. OFFICERS /	apen and tile if approable (NOTE AND DIRECTORS	E. Angistared Agent signature requ	X	DAY. DERS AND DIRECTORS IN 12
SIGNATURE Signature typed pristed here all registroud  12. OFFICERS /  TITLE D	artent and title if any exable (NOTE	E: Angistered Agent signature requirements 13.	uired when reinstating)  ADDITIONS/CHANGES TO OFFICE	4/17/9/
SIGNATURE Lighture Appear of product mime of registrated to the product of the pr	apen and tile if approable (NOTE AND DIRECTORS	E Registered Agent signature requirements 13.  1.1 TITLE  1.2 NAME  B	uired when reinstating)	DAY. DERS AND DIRECTORS IN 12
SIGNATURE DIPLOTO / PRODUCTION OF THE CONTROL OF TH	apen and tile if approable (NOTE AND DIRECTORS	E. Horgistored Agent signature required.  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	uired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DAY. DERS AND DIRECTORS IN 12
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