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Feb 04 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 # P96000051032 (6)

1. Corporation Name
PROVISION MANAGEMENT, INC.



Principal Place of Business
2655 CURRYVILLE ROAD
CHULUOTA FL 32766

Mailing Address
2655 CURRYVILLE ROAD
CHULUOTA FL 32766-0156

3. Date Incorporated or Qualified
06/13/1996

3a. Date of Last Report

21. Principal Place of Business
407 Flatwood Drive

2a. Mailing Address
407 Flatwood Drive

4. FEI Number
59-3389674

Applied For
Not Applicable

22. Suite, Apt. #, etc.

27. Suite, Apt. #, etc.

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

23. City & State
Winter Springs, FL

28. City & State
Winter Springs, FL

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

24. Zip
32708

25. Country
USA

29. Zip
32708

30. Country
USA

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARTIN, GEORGE W
2655 CURRYVILLE ROAD
CHULUOTA FL 32766

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
407 Flatwood Drive
83.
84. City Winter Springs FL 85. Zip Code 32708

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *George W. Martin* George W. Martin - Resident DATE: 1/13/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE
NAME	MARTIN, GEORGE W	
STREET ADDRESS	2655 CURRYVILLE ROAD	
CITY-ST-ZIP	CHULUOTA FL 32766	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MARTIN, PAULA J	
STREET ADDRESS	2655 CURRYVILLE ROAD	
CITY-ST-ZIP	CHULUOTA FL 32766	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	407 Flatwood Drive
1.4 CITY-ST-ZIP	Winter Springs, FL 32708
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	407 Flatwood Drive
2.4 CITY-ST-ZIP	Winter Springs, FL 32708
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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: *George W. Martin* DATE: 1/28/97 DAYTIME PHONE: 407-342-3823

CR2E034 (9/96)