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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000051396 (5)

W. B. PRINGLE, III, ESQUIRE, P.A.

FILED
May 06 1997 8:00am
Secretary of State



7380 SAND LAKE ROAD SUITE 350 ORLANDO FL 32819 2. Principal Prace of Business		7380 SAND LAKE ROX SUITE 350	Mailing Address 7380 SAND LAKE ROAD SUITE 350 ORLANDO FL 32819-5257			3. Date Incorporated or Qualified 3a. Date of Lest Report 06/14/1996			
		2a. Mailing Address			·	4. FEI Number	7.	7-	Applied For
21		26				59-3384538		_	Not Applicable
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional e Required
City & Sta	nte	City & State				Election Campaign Financing Trust Fund Contribution			00 May Be
Z(p	Country 25	Zip 29	30 Cou	ntry		8. This corporation has liability for Florida Statutes		ax und	er s. 199.032,
21	9. Name and Address of Cu					10. Name and Address of New Re			
PR	INGLE, W B III			81	Name				
	11 Baesel view Klando Fl 32835				Street Addre	ddress (P.O. Box Number is Not Acceptable)			
				83					
				84	City			85	Zip Code
						oration submits this statement for the pion's board of directors. I hereby accept	FL	Щ	
	Source to the country trained name of registers	ed agent and title if Applicable	(NOTE: Registered	1 Apent	Signature require	ed when reinslating)	DATE		
12.	.,	S AND DIRECTORS	13.	1 Agent	signature require	ed when reinslating) ADDITIONS/CHANGES TO OFFIC			***************************************
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. 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 truetee 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 open attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/97 401/843-3701