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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000051802 (2)

FILED Mar 18 1997 8:00am Secretary of State

	ORPORATION								1871: 4848: 118 1884: 1884: 188			
Principal Flace 10130 BERTRAM FORT MYERS FI	1 LANE	10130 BERT	Mailing Address 10130 Bertram Lane Fort Myers Fl. 33919-4598									
							3. Date Incor 06/18/19	porated or Qualific	d 3a. I	Date of Last I	Report	
2. Principal Pl	lace of Business	2a. Maifirig	Address				4. FEI Numbe	er .		IA	pplied For	
21		26					65-0	676297	·		ot Applicable	
Suite, Apt	#, etc	—	Apt. #, etc.				5. Certificate	of Status Desired			Additional equired	
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Zib	Country	Zip		Cour	ntry			ration has liability				
24	25	29		30			Florida Sta	tutes	Yes	□ No		
	9. Name and Address of Curr	ent Registered A	gent				10. Name and	Address of New	Registere	d Agent		
	ther, charles J			};	81	Name						
	O BERTRAM LANE T MYERS FL 33912				82	Street Add	dress (P.O. Box Nu	mber is Not Accep	otable)			
				[-	83							
				ļ.	84	City			F	85 Zip	Code	
11. Pursuant to office or readent. Lat	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	502 and 607.1508 ate of Florida Such ligations of, Sectio	i, Florida Statu n change was n 607 0506 F	ites, the ab authorized	ove-	named cor the corpora	rporation submits t ation's board of dir	nis statement for the ectors. I hereby ac	ne purpose scept the ap	of changing opointment a	its registered s registered	
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14.1 to hereby define the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify intal the information indebated 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 an an officer or or rector 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 the rigid, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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