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

CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthan

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600053981 (2)
1. Corporation Name
APDI ECHAW COMPANY: INC. NC 5-19-97 -APPLESHAW COMPANY, INC. NC

WINDSOR

Mailing Address

4380 NORTHLAKE BLVD, SUITE 205

4360 NORTHLAKE BLVD. SUITE 205

## **FILED** Jun 13 1997 8:00am Secretary of State



PALM BEACH GARDENS FL 33410		PALM BEACH GARDENS FL 33410-6265					
					3. Date Incorporated or Qualified 06/24/1996	3a. Date of Last Rep	orl
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEU (mber \( \) 2 4/	Appli	ied For
21		26			93 00 T 10		Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip ,	Country 25	Zip Country 30			8. This corporation has liability for intangible tay under s. 199.032, Florida Statutes		
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Re	gistered Agent	
	IN E. WASHOFSKY, E.A., P./		8	1 Name			
	<b>No</b> rthlake BLVD, suite 20		8	2 Street	Address (P.O. Box Number is Not Acceptate	ole)	
PALM	BEACH GARDENS FL 33410	)					
			[8	3			i
•			8	4 City		FL 85 Zip Co	de
11. Pursuant to office or reg	the provisions of Sections 607.05 stered agent, or both, in the Sta	02 and 607.1508, Florida Stat te of Florida, Such change was	utes, the abo s authorized l	ve-named by the corp	corporation submits this statement for the p poration's board of directors. I hereby accep	surpose of changing its report the appointment as re-	egistered gistered
agent. aam SIGNATURE	tamiliar with, and accept the obli	gations of, Section 607.0505, I	Florida Statut	es.			
¥ Sk	gnature, typed or printed name of registered a			gent signature	e required whon reinstating)	DATE	
12.	PD OFFICERS A	ND DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFICE		Addition
	HARTLEY, DAVID		1.2 NAM			— onango L	Notified
STREET ADDRESS	4360 NORTHLAKE BLVD, SU	ITE 205		e1 address			
	PALM BEACH GARDENS FL		1.4 CITY				
TITLE	<u></u>	DELETE	2.1 1/11			☐ Change	Addition
NAME			2.2 NAM	Ε			
STREET ADDRESS			2.3 STRE	et address			,
CITY-ST-ZIP			2. 4 CiTy	-ST-ZIP			
TITLE		☐ DELETE	3 1 TITLE			Change [	Addition
NAME			3.2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4 GITY 4.1 TITLE	- \$1 - ZIP		Change	Addition
NAME		□ neces				C cusufis f	T) VOOITION
STREET ADDRESS			4. 2 NAM	et address			
CITY-ST-ZIP				- ST - ZIP			
TITLE		DELETÉ	5.1 TITLE			Change	Addition
NAME			5 2 NAM				
STREET ADDRESS				FT ADDRESS	20000221 -06/17/970100	BB rZ	
CITY - ST - ZIP			5.4 CITY			J21J1U4	
TITLE		DELETE	6.1 TITLE		***660.00	☐ Change	Addition
NAME			6.2 NAM	E			
STREET ADDRESS			6.3 STRE	ET ADDRESS		c	5
CITY-ST-ZIP			6.4 CITY	- ST- ZIP	<u> </u>	_ · · €	>/13/9

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.