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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000055606 (3)

MARICAMP PINE INVESTORS, INC.

FILED Apr 14 1997 8:00am Secretary of State



Principal Place	e or Business	Ma ling Address			r ibaşıdar diği ilkin derin desil edili derin dönür ölilər əlirə derin derin firki ibar				
1030 WEST INT	erijational speedway blyd. Chifl 32114	1030 WEST INTER DAYTONA BEACH			r Blvd.				
•						3. Date Incorporated or Qualified 07/01/1996	3a. Date o	of Last R	eport
2. Principal Pl	ac of Business	2a. Mailing Addre	988			4. FEI Number		At	oplied For
1		26				59-3388769		No	ot Applicable
Suite, Apt	#, 4t .:	Suite, Apt. #,	etc.			5. Certificate of Status Desired			Additional equired
City & State	9	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added	May Be to Fees
Zip 4]	Country 25	7 _(p)	30	Country		8. This corporation has liability for it	ntangible tax		. 199.032,
	g. Name and Address of Curre			٠		10. Name and Address of New Re			
LICH	ITIBMAN, CHARLES S			B1	Name		<u> </u>		
1030 V/EST INTERNATIONAL SPEEDWAY BLVD.					Street Add	ress (P.O. Box Number is Not Acceptable)			
DAYTCINA BEACH FL 32114				83		Acceptable to the second of th			
				03					
				84	City		FL	35 Zip	Code
44 Thursday	to be previous of Sections 607.06	02 and 607 1509. Florid	Na Statutos I	the show	named cor	poration submits this statement for the pation's board of directors. I hereby accept		anging i	te registere
SIGNATURE	Stip of we, typed or pay ted name of registered as OFFICERS AN	pini and title if applicable ND DIRECTORS	(NOTE Rej	gistered Age	nt signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DI	RECTOF	3S IN 12
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4. Identified a certify that the information supplied with this filling does not quality for the exemption stated in Section 119.0/(3)(i), Fronce 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:

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Daytime Phone #