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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000056407 (5)

P.C. DESIGN AND DRAFTING, INC.

FILED Feb 24 1997 8:00am Secretary of State



Principal Place of Business Mailing Address									
4 CEDAR HOLLOW COURT 4 CEDAR HOLLOW COURT									
PALM COAST		PALM COAST FL 32137-8							
						3. Date Incorporated or Qualified 07/01/1996	3a. Date	of Last	Report
2. Principal f	2a. Mailing Address	}			4. FEI Number	- 		Applied For	
	MILITY DR.	26			59-3389323 Not Applicate				
Suite, Apt		Suite, Apt. #, etc			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Stat	M COAST, FC	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Z(j.)	Country	Zip	Cou	untry		8. This corporation has tiability for i			s. 199.032,
24 321		29	30	,			Yes 🗌		
	9. Name and Address of Curren	I Registered Agent		81	Mana	10. Name and Address of New Re	gistered A	jent	
	JD, KENNETH R			61	Name				
4 CEDAR HOLLOW COURT PALM COAST FL 32137				82	Street Add	Address (P.O. Box Number is Not Acceptable)			
				B3					
				63					
				84	City		FL	85 Zig	p Code
SIGNATURE	Signature, ignet or printed name of regis or stack		H Registore	ed Age	nt signature requi	ired when reinstating)	DATE		
12,	.,	D DIRECTORS	13.		r	ADDITIONS/CHANGES TO OFFIC		DIRECTO Change	
THEF	D Boud, Kenneth R	LI DELETE	1.1 1	HLE JAME			L	_1 Change	e L. Additio
NAME STREET ADDRESS	4 CEDAR HOLLOW COURT		- 1		ADDRESS				
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NAME PROFILE ADDRESS A			i i	VAME STOCET	ADDRESS				
STREET ADDRESS		•							
CFTY - 5T - ZIP			541	CITY-S	1-48- 1	11.0			

14. I do hereby certify that the information supplied with this filing oods not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this arrival 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 cooperation 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 #sidress.

SIGNATURE:

GRANATE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-97 (904) 446-6453

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