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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000056764 (9)

DANNER & ASSOCIATES, INC.

FILED
May 16 1997 8:00am
Secretary of State

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Principal Place of Business Mailing Address					r sameriader eine sante deter dabere martit dazer matite abere auter samen arter alde inne.					
12657 - 109TH & LARGO FL <del>-84048</del>	<b>+</b>		12657 - 109TH STREET. N. LARGO FL 33778-2115							
3	3778					3. Date Incorporated or Qualified 07/05/1996	3a. Date	e of Last R	eport	
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number	<del></del>	Ar	oplied For	
1		26						, No	ot Applicable	
Suite, Apt #	f, etc	Suite, Apt. #, etc	i.			5. Certificate of Status Desired		\$8.75 / Fee Re		
City & State		City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 Added t		
<b>Z</b> (p <b>4</b> ]	Country 25	Zip 29	<b>30</b>	nlry			Yes	No	199.032,	
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Re	gistered A	gent		
DANN	ER, MARC L			61	Name					
	' - 109TH STREET, N. O FL <b>24649</b>			82	Street Add	ress (P.O. Box Number is Not Acceptab	ie)			
	33778			83					P-90-00-0-1	
				84	City		FL	85 Zip	Code	
agerit Lan SIGNATURE .	in familiar with, and accept the ob- signature, types or printed name of registured	ligations of, Section 607.050	5, Florida Stat	utes		tion's board of directors. I hereby acceptions when relistating)	DATE	······		
12.	OFFIÇERS /	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC				
TILE	fresident	DELETI	E 1.1711	TLE			Ĺ	Change	Addition	
NAME	Marc L. Da	nner 9 St N	1.2 N/		-					
STREET ADDRESS	12657 - 10		, O		ADDRESS					
DITY-S1-7iP	Largo , F	edf Deleti	<u> </u>		r-ziP			Change	Addition	
TIDE	VICE Trespai							T CLIMITAE		
NAME STREET ADDRESS	Kebecca L.	Danner	2.2 NA		ADDRESS		2.4			
CHY-St-ZIP	17657-10	1, 25 M 2 2 7 7	8 2.40							
TITLE	Laigo F	DELET			11 · ZIr			Change	Addition	
NAME			3.2 N/				•			
STREET ADDRESS	$\sim$				ADDRESS					
CITY - ST - ZIP			3.4 C							
TITLE		☐ DELET			<u> </u>			Change	Addition	
NAME	_		4.2 N	AME						
STHELL ADDRESS			4.3 ST	REET	ADDRESS					
CITY-ST-74		_	4.4 C							
TillE		☐ DELETI						Change	Addition	
NAME			5.2 NA	AME						
STREET ADDRESS	$\sim$	_	5.3 ST	REET	ADDRESS	•				
CHY-ST-ZIP			5.4 CI	TY - S	T-21P	•				
TITLE		DELET					I	Change	Addition	
NAME:	\ /		6.2 NA	AME						
STREET ADORESS	$\times$		6.3 S1	TAEET	ADDRESS	•				
CITY - ST - 7/P		_			T-ZIP					
		~_	0.4 01		. +"					

14. 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 Brock 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: //WWW

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

(8/3)584-606/