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 #	P96000062083	(6)
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Principal Place of Business Mailing Address 100 OLD DRIFTON RD 100 OLD DRIFTON RD MONTICELLO FL 32344				***************************************		
					3. Date Incorporated or Qualified 3a. Date of Last Report	
2. Principal	Principal Place of Business 2a, Mailing Address				07/23/1996 4. FEI Number Applied For	
21					593389795 Not Applica	
Suite, Ap	ot #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required	
City & St	tate	City & State	· · · · · · · · · · · · · · · · · · ·		Election Campaign Financing \$5.00 May Be	
23		28	_		Trust Fund Contribution	
<i>Z</i> ip	Country	Zιρ	Country 30	У	8. This corporation has fiability for intangible tax under s. 199.032 Florida Statutes Yes No	
24	(25) 9. Name and Address of Curre	29 ent Registered Agent	[30]	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10. Name and Address of New Registered Agent	
BI	RD, T. BUCKINGHAM		81	Name		
	20 S CHERRY ST		82	Street Add	ress (P.O. Box Number is Not Acceptable)	
M	ONTICELLO FL 32344		83		ه سروا استان المرد الم	
			L	<u> </u>		
			84	City	FL 85 Zip Code	
SIGNATURI 12.	Signature, typed or printed name of registered a	gent and tine if applicable (NO NO DIRECTORS DELETE	TE Registered Ag	gent signáture requ	ired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Add	
NAME	SHEFFIELD, JOHN K		1.2 NAME	.	The state of the s	
STREET ADDRES	ss 100 OLD DRIFTON RD		1.3 STREE	1 ADDRESS		
CITY-ST-ZIP	MONTICELLO FL 32344	- Louisi	1.4 CITY-	ST-ZIP	T Change T Add	
TITLE NAME	V BAUER, JEFF	DELETE	2.1 TIPLE 2.2 NAME	<u> </u>	[_] Change	
STREET ADORES	AND ALL BRIDEROUS PR			1 ADDRESS		
CHY-ST-ZIP	MONTICELLO FL 32344		2 4 CITY -	ST-ZIP		
TITLE	S Sheffield, vicki v	DELETE	3.1 TITLE 3.2 NAME		Change Add	
NAME STREET ADDRES	AND DESCRIPTION OF		1	T ADDRESS		
City-St-Zip	MONTICELLO FL 32344		3.4. CITY-	1		
TITLE		DELETE	41 TITLE		Change Add	
NAME STREET ADDRES	SHEFFIELD, KENNETH 100 OLD DRIFTON RD		4.2 NAME	T ADDRESS		
CITY - ST - ZIP	MONTICELLO FL 32344		4.5 STREE	- 1		
TITLE		☐ DELETE	5.1 TITLE		Change Add	
NAME			5.2 NAME	1		
STREET ADDRES	58		5.3 STREE 5.4 City-	T ADDRESS		
TALE		DELETE	6.1 TILLE	31.44.	Change Add	
NAME			6.2 NAME			
STREET ADDRES	35			T ADDRESS		
CITY-SI-ZIP		7 14 At 41 At 5	6.4 CITY		of in Caption 110 07/2)(A Flavida Statutor, Lifuthor cartify that the	

non recept certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(r), 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 flock 13 if changed, or on an attachment with an address.

(904) 309-0603

FILED

Apr 14 1997 8:00am

Secretary of State