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 # P96000078115 (8)

UNION CAPITAL INVESTMENTS OF FLORIDA, INC.

Princ	ipal	Place	of Busi	ness
9991	1 EÉ	DOAD	DIRTE	17

Mailing Address

2a. Mailing Address

26

WINTER PARK FL 82789

2. Principal Place of Business

appears in Block 12 or Block 13 if phange

2221 LEE ROAD. SUITE 17 WINTER PARK FL 32789-1872

FILED Jun 09 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For

Not Applicable

3. Date Incorporated or Qualified

09/18/1996

APPLIED FOR

4. FEI Number

Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Add		
22 City & State	A	City & State		6. Election Campaign Financing	· · · · · · · · · · · · · · · · · · ·		
23		28		Trust Fund Contribution	\$5.00 Ma		
Zip	Country	Zip	Country	8. This corporation has liability fo		9.032,	
24 26 29 30			30				
	9. Name and Address of Current	Registered Agent		10. Name and Address of New F	egistered Agent		
THO	MAS, BRYAN M		81 Name				
. 222	1 LEE ROAD, SUITE 17		82 Street Address (P.O. Box Number is Not Acceptable)				
- WIN	TER PARK FL 32789		on contradictory (i.e. box remiser to rey necessary)				
			83				
	**************************************		100				
` * `			84 City	the state of the s	FL 85 Zip Cod	e	
				corporation submits this statement for the			
	egistered agent, or both, in the State om m familiar with, and accept the obligat			poration's board of directors. Thereby acc	ept the appointment as reg	istered	
•	an lamiliar with, and accept the congar	ioris or, occitori ocz .coco, i ior	icia Sialbies.				
SIGNATURE	Signature, typed or printed name of registered agent	and little if applicable (NOTE:	Registered Agent signature	required when reinstating)	DATE		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS II	V 12 6	
TITLE	D	DELETE	1.1 DTLE		☐ Change	12 96 Addition 6	
NAME	OLARKE, LILLIAN D		1.2 NAME				
STREET ADDRESS	5871 MICHAUX ST	•	13 STREET ADDRESS			မြ	
CITY-ST-ZIP	BOCA RATON FL 33433		14 CITY-ST-ZIP			CR2E034	
TITLE	<u></u>	DELETE	21 1HLE		Change	J Addition じ	
NAME	P D Thomas, Bryan M.		2.2 NAME		-		
STREET ADDRESS	2221 Lee Road, S	uito 17	2.3 STHEET ADDRESS				
CITY-ST-ZIP			2. 4 DITY-ST-ZIP				
TITLE	Winter Park, FL	DELETE	31 TITLE		Change	Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. D(TY-ST-Z)P				
TITLE		DELETE	4 1 TITLE		Change	Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4.0(TY-ST-ZIP				
TITLE		DELETE	51 TIFLE		Change	Addition	
NAME			5.2 NAME	annoneer	79562	_	
STREET ADDRESS			5.3 \$1REFT ADDRESS	20000220 -06/11/9701:	125023		
CITY-ST-ZIP			5.4 DITY - ST - ZIP	***165.00			
TITLE		DELETE	6.1 TITLE		Change	Addition	
NAME			6.2 NAME		P		
STREET ADDRESS			6.3 STREET ADDRESS		Ĺ	'a	
City-St-Zip			6.4 City-St-7IP		6	·1	
	ov certify that the information supplied	with this filing does not qualify		L	tes. I further certify that the		
informatio	in indicated on this annual report or su	pplemental apriual report is tru	ic and accurate and	stated in Section 119.07(3)(i), Florida Statut I that my signature shall have the same leg toport as required by Chapter 607, Florida	jal effect as if made under	oath; that	