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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600086699 (1)

J. HOWELL & ASSOCIATES, INC.

703 CLUBWOOD COURT WINTER SPRINGS FL 32708		703 CLUBWOOD COURT WINTER SPRINGS FL 32708-3725							
						3. Date Incorporated or Qualified 10/14/1996	3a. Dat	e of Last R	leport
2. Principal Pi	lace of Business	2a, Mailing Address				4. FEI Number			pplied For
21		26				59-3408812			ot Applicable
Suite, Apt #, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State 23	0	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
7ip 24	Country 25	7ip 29	Country 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Re	gistered A	gent	
	Well, Joseph S		{	31	Name				
703 CLUBWOOD COURT WINTER SPRINGS FL 32708			1	32	Street Address (P.O. Box Number is Not Acceptable)				
••••			1	33					
			1	84	Crty	:	FL	85 Zip	Code
office or r	to the provisions of sections do vision egistered agent, or both, in the State on familiar with, and accept the obligation and accept the obligation and accept the obligation and of the section and of th	of Florida Such change was tions of, Section 607,0505, F	s authorized Florida Statu	by tes	the corporati	oration submits this statement for the p ion's board of directors. I hereby accep ed when reinstating)	DATE	ointment as	s registereo
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND		
100,E	PSTV	DELETE	1.1 TITE					L Change	[] Addition
NAME	HOWELL, JOSEPH S		1.2 NAM						
STREET ADDRESS	703 CLUBWOOD COURT WINTER SPRINGS FL 32708				ADDRESS				
CHY-S1-ZIP	D D	OELETE	1.4 CIT 2.1 TITL	—	1- ZIP			Change	Addition
TITLE NAME	HOWELL, JOSEPH S	EJ ottete	2.2 NAN						
STREET ADDRESS	703 CLUBWOOD COURT				ADDRESS				
City - \$1 - ZiP	WINTER SPRINGS FL 32708		2. 4 CH	Y-S	ST- Z IP				
Tille		DELFTE	3.1 THTL	F				Change	Addition
NAM!			3.2 NAM	ME					
STREET ADDRESS			3.3 STR	REFT	ADDRESS				
CHY-ST-7IP		T Briese	3.4. CIT		ST-2/P			Change	Addition
THILE		LI DELETE	4.1 TIT					☐ Change	F"T Vogition
NAME			4. 2 NA		ADDRESS				
STREET ADDRESS					ADDRESS				
CHY-ST-7IP TITLE		DELETE	4.4 CIT 5.1 T(T)) LIF			Change	Addition
NAME			5.2 NAI					,	
STREET ALTORESS					ADDRESS				
COY-51-20			5.4 CIT						
TOLE		DELETE	61717					Change	Addition
NAME			6.2 NA	ME		•			
STREET ADDRESS			6 3 STF	REET	ADDRESS				

64 CITY-ST-ZIP

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 Block. 12 or Block. 3 if changed, or on an attachment with an address.

SIGNATURE:

CITY: \$1-7.9

FILED

Feb 24 1997 8:00am

Secretary of State