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Feb 27 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000087090 (2)

1. Corporation Name
FLORIDA SITE SPECIALISTS CORPORATION



Principal Place of Business
4917 S ORANGE AVENUE
ORLANDO FL 32806

Mailing Address
4917 S ORANGE AVENUE
ORLANDO FL 32806-6932

3. Date Incorporated or Qualified
10/22/1996

3a. Date of Last Report

2. Principal Place of Business
21 4917 S. ORANGE AVE.
Suite, Apt. #, etc.

2a. Mailing Address
26 P.O. BOX 561028
Suite, Apt. #, etc.

4. FEI Number
59-3419839

Applied For
Not Applicable

22 City & State
23 ORLANDO FLORIDA

27 City & State
28 ORLANDO FLORIDA

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24 Zip 32806 25 Country ORANGE
29 Zip 32856- 30 Country ORANGE

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No NONE ANTICIP

9. Name and Address of Current Registered Agent
BISSMEYER, ELIZABETH
4917 S ORANGE AVENUE
ORLANDO FL 32806

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 Zip Code FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ELIZABETH J. BISSMEYER Elizabeth J. Bissmeyer (President) 1-28-97
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSTD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BISSMEYER, ELIZABETH	1.2 NAME	
STREET ADDRESS	4917 S ORANGE AVENUE	1.3 STREET ADDRESS	
CITY - ST - ZIP	ORLANDO FL 32806	1.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 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 13 if changed, or on an attachment with an address.

SIGNATURE: Elizabeth J. Bissmeyer 1-28-97 (907) 920-9009
Signature typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/96)