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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000089778 (0)

AMERICAN LIBERTY, INC.

		,			1 (\$ 00,000) 780 (0) (0) (0) (0) 581 (\$ 00) (0)		
Principal Place of Business Mailing Address					T I INDUNADA RAD KOMO DI PAR BERAN BOMA BOMA BOMA KURIN KODIN HABUK KUN INDU		
1878 MATTERHORN DRIVE 1878 MATTERHOR ORLANDO FL 32818 ORLANDO FL 3281							
					3. Date Incorporated or Qualified 10/31/1996	3a. Date of Last F	Report
2. Principa' P	lace of Business	2a. Mailing Address			4. FEI Number	A	oplied For
		26		59-3408439		ot Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional
22 City & State		City & State					equired
23	e.	28			6. Election Campaign Financing Trust Fund Contribution	_	May Be to Fees
23 2 (p	Country Zip		Country		This corporation has liability for in:		
24	}		0		Florida Statutes		
	9. Name and Address of Current				10. Name and Address of New Reg	latered Agent	
\ AME	RHAWYER CHARTERED	THE PARTY NAME OF THE PARTY NA	81	Name			
	ALMERIA AVENUE		82	Street Add	dress (P.O. Box Number is Not Acceptable	-i	
	RAL GABLES FL 33134			birbor Adi	Si oss (1 ,O. Dox Horrison is Hot Noospital	~,	
	and the second s		83				
•	•		84	City		FL 85 Zip	Code
44 D remant	to the provisions of Sections 607 0503	and 607 1509 Florida Statutes	the show	a named co	rnoration submits this statement for the nu		ts registered
	registered agent, or both, in the State of amiliar with, and accept the obligations.	of Florida. Such change was autions of, Section 607.0505, Flori	thorized by	the corpora	rporation submits this statement for the pu ation's board of directors. I hereby accept	the appointment as	registered
SIGNATURE	Signal inell type of or printed name of registrationages	and title II applicable (NOTE	Registered Age	par arutanga In	uired when reinstating)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE		
THLE	PD	☐ DELETE	1.1 TITLE			L Change	Addition
NAME	SULLIVAN, JUNE WOODRUFF		1.2 NAME				
STREET ADDRESS	1878 MATTERHORN DRIVE		1.3 STREET				
Caty - St - 7iP	ORLANDO FL 32818	DELETE	1.4 CITY - S	1-ZIP		Change	Addition
TITLE	VSTD	TT nerese	21 TITLE	. 1		() Unange	L.J Addition
NAME	SULLIVAN, G. MICHAEL 1878 MATTERHORN DRIVE		2.2 NAME				
STREET ADDRESS	ORLANDO FL 32818		2.3 STREET			E ⁴³ 5.	
CITY - ST - 7IP	D D	DELETE	2. 4 CITY - 3 3.1 TITLE	SI - ZIP	K."	Change	Addition
NAME	WILLIAMS, JENNIFER JUNE					, in the second of the second	demand . and an and a
STREET ADDRESS	1878 MATTERHORN DRIVE		3.2 NAME 3.3 STREET	ADDRESS			
CITY - ST - ZIF	ORLANDO FL 32818		3.4. CITY-				
TITLE	D	☐ DELETE	4.1 TITLE	ar GR		Change	Addition
NAME	MALQUIST, MICHELLE RENEE		4. 2 NAME	ļ			
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32818		4.4 CITY - S				
TITLE	D VICE PRESID	IRECTUR DELETE	5.1 TITLE			☐ Change	Addition
NAME	SILVA, REBECCA KAY	· - •	5.2 NAME	- 1			
STREET ADDRESS	1878 MATTERHORN DRIVE		5.3 STREET	ADDRESS			
C(1Y+S*-ZIP	ORLANDO FL 32818		5.4 CITY - 9	1			
TITLE	D	DELETE	6.1 TITLE		11.0.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4	☐ Change	Addition
NAME	HAMMOND, AMY LYNN		6.2 NAME	}			
STREET ADDRESS	AADA AAADIMIN IABAA BARAM		6.3 STREET	ADDRESS			
CITY, ST. 7IP	ORLANDO FL 32818		SACITY-S				

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

1/10/97

Daytime Pt-cne #

FILED

Feb 26 1997 8:00am

Secretary of State

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