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**

P96000089805 (1)

Principal Place of Business Mailing Address 100 WEST KENNEDY BLVD. SUITE 660 TAMPA FL 33602 Mailing Address 100 WEST KENNEDY BLVD. SUITE 660 TAMPA FL 33602 TAMPA FL 33602					
				3. Date Incorporated or Qualified 10/31/1996	d 3a. Date of Last Report
2. Principal P	lace of Business	2a. Mailing Address		4. FE! Number	Applied For
21		26		59-3445972	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23 28				Trust Fund Contribution	Added to Fees
Zip	Country 25	Zip 29	Country 30	8. This corporation has liability to Florida Statutes	or intangible tax under s. 199.032,
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New I	Registered Agent
SCH	HRILS, DEBRA A		81 Name		
501 E. KENNEDY BLVD.			82 Street A	ddress (P.O. Box Number is Not Accept	able)
SUITE 1400					
TAN	IPA FL 33602		63		1
			84 City		85 Zip Code
					FL 2 P COCC
office or r agent. I a	egistered agent, or both, in the Stat m familiar with, and accept the obliq	e of Florida. Such change was a gations of, Section 607.0505, Flo	as, the above-named could be corporated by the corporated Statutes.	orporation submits this statement for the ration's board of directors. I hereby acc	epurpose of changing its registered sept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable (NOTE	Registered Agent signature re	quired when reinstaling)	DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TITLE	D	☐ DELETE	1.1 TITLE		Change L Addition (
NAME	MOORE, JAN J	Ame	1.2 NAME		
STREET ADDRESS 100 WEST KENNEDY BLVD. STE 660			1.3 STREET ADDRESS		įį
CITY-ST-ZIP	TAMPA FL 33802	Decem	1.4 CITY-ST-ZIP	<u> </u>	
TITLE	D D	☐ DELETE	2.1 TITLE		Change Addition
NAME	BATEMAN, RICK J	ATT AAA	2.2 NAME		Į.
STREET ADDRESS	100 WEST KENNEDY BLVD.	81E 660	2.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33602	T priese	2. 4 CITY-ST-ZIP		
TITLE	E	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		1
STREET ADDRESS			3.3 STREET ADDRESS		ŀ
CITY-ST-2IP		DELETE	3.4 CITY-ST-ZIP 4.1 TITLE		Change Addition
l		Decen	E í		C change C Addition
NAME Street Address			4. 2 NAME 4.3 STREET ADDRESS		Į.
1 1					
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS	,		5.3 STREET ADDRESS		į
CITY-SI-ZIP			5.4 City-ST-ZiP		\
TITLE		DELETE	6.1 TITLE		Change Addition
NAME		_	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		[

14. I do hereby certify that the information surplied 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 popular 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 composition of the receiver or tursive empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if hapted for on any attriction of the receiver or any attriction of the receiver or tursive empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

6.4 CITY-ST-ZIP

FILED

Jun 24 1997 8:00am

Secretary of State