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

TAMPA FL 33647-2285

PROFIT CORPORATION ANNUAL REPORT

1997

TAMPA FL 33626



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000093044 (1)

WHIT MSY	213
Principal Place of Business	Mailing Address
17813 HICKORY MOSS PLACE	17813 HICKORY MOSS PLACE

FILED Apr 15 1997 8:00am Secretary of State



3a. Date of Last Report

3. Date Incorporated or Qualified

11/07/1996

2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For		
21		26 PO BOX	160	<u> </u>	59-579375	Not Applicable		
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State City & State			1	<u></u> ,	Election Campaign Financing	\$5.00 May Be		
23		28 Land O Lo	rkez	,大人	Trust Fund Contribution	Added to Fees		
7yp Country Z-p Country 24 33647 25 29 346 39 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 Registered Agent			
DWYER, DANIEL L				Name				
DADE CITY FL 33523			82	82 Street Address (P.O. Box Number is Not Acceptable)				
				83				
•	•							
					4 City FL 85 Zip Code			
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. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.								
SIGNATURE								
	Superview typical or printed name of registered agent.			ent signature required when reinstatling) DATE				
12.	OFFICERS AND I		13.		ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	D CHOWLER CAMPDA	DELETE	1.1 TITLE		•	Change		
NAMÉ	SHOW-KILEY, SANDRA L		1.2 NAME	1				
STREET ADDRESS	17813 HICKORY MOSS PLACE		1.3 STREET		'2>C	115		
City SI- 212			1.4 CITY - S	T-ZIP	Change Addition			
TIFLE	D COCODY MADA E	☐ DEFEIE	21 TITLE			CT CHANGE CT VECTION		
NAMI	CROSBY, MARIA E		2 2 NAME					
STREET ADDRESS	14045 PARADISE LANE		2.3 STREET		e.			
CITY-ST-ZIF	DADE CITY FL 33525	DELETE	2. 4 CITY - S 3.1 TITLE	ST-ZIP		Change Addition		
1	Marian 1 1 1 1 1 1 1 1 1		3.1 MAME			CT cusude CT Vacacau		
NAME CANCEL ADDRESS OF	1801 SW 67TH TERR		3.3 STREET	1000000				
STREET ADDRESS	PLANTATION FL 33317		1					
C:TY+ST-ZIP THLE	B	DELETE	3.4. CITY - : 4.1 TITLE	SE-41P		Change Addition		
NAMÉ	DANIELS, GLENNIS M	C DECENT	4.1 THEE		38410 11- 1	Country Country		
STREET ADDRESS	38416 VENUS AVE		4. 2 NAME		38416 Venus Ave			
City - S1 - ZiP	ZEPHYRHILLS FL 33540		4.4 CITY - S	- 1 - I				
Tille	D	☐ DELETE	5 1 TITLE	1- £IF		Change Addition		
NAMI	HOFFMAN, SUE R		52 NAME	ł				
STREET ADDRESS	13517 HOPE LANE		5 3 STREET	Andress				
CITY-ST 7/P	HUDSON FL 34667		5.4 CiTY-S					
THEF		DELETE	6.1 TITLE	·	90000214524	Change Addition		
NAME		****	6.2 NAME		90000214574 -04/17/970100505			
STEEL ALORESS			6.3 STREET	ADDRESS	***165.00	ן קוני י		
CHY-S*-7IP			6.4 CITY-S			4.		
	by certify that the information supplied	with this filing does not qualify			ited in Section 119.07(3)(i), Florida Statutes. I furthe	or 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.