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

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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11. Pursuant to the provising of Sections 60 0502 and 607 1508, Florida Statutes, the above-named concoration of the or registered agold, or both, in the State of Florida Such change was authorized by the corporation's agent it am tamplate the acceptable obligations of section 607.0505, Florida Springer

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OFFICERS AND DIRECTORS

name of registered agent and t

4017 - 43RD STREET SOUTH ST. PETERSBURG FL 33711-4251

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Country

81

82

83 84 City

13

11 TITLE

1.2 NAME

DELETE

Kresident

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DOCUMENT # P96000093795 (8)

Country

9. Name and Address of Current Registered Agent

25

GEORGES, RICHARD M 3656 FIRST AVENUE NORTH

agent I am familiar att

ST. PETERSBURG FL 33713

SCHOLL, MARY J

SHOALS, INC.

Principal Place of Business

4017 - 43RD STREET SOUTH

2. Principa: Place of Business

ST. PETERSBURG FL 33711

Suite, Apl. #, etc

City & State

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SIGNATURE

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TITLE

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CITY- \$1 - 7-P

SIGNATURE:

4017 - 43RD STREET SOUTH STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL 33711 1.4 CITY-ST-ZIP CHY-S1-ZIF DELETE Change Addition 2.1 TITLE SCHOLL, CARL E. 4017 43rd Street South NAV-2.2 NAME 2.3 STREET ADORESS STREET ADDRESS St. Petersburg, FL 33711 2. 4 CITY-ST-ZIP CITY ST-ZIP DELETE 3.1 TITLE Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. CITY-ST-ZIP COTY-ST-ZIP DELETE Change Addition 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CHY-ST ZIP DELETE Change Addition 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 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

FILED May 01 1997 8:00am Secretary of State

Date Incorporated or Qualified	3a. Date of Last Report

🔣 Yes 🔲 No

8. This corporation has liability for intangible tax under s. 199.032,

n submits this statement for the purpose of changing its registered pound of directors. I hereby accept the appointment as registered

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

10. Name and Address of New Registered Agent

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Change

8678691

Not Applicable

11/15/1996

<u>02-035</u>

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Florida Statutes

4. FEI Number