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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 02 1997 8:00am

Secretary of State

4/26/97

(813)409-9389

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000093905 (3)

NATURE'S DESIGNS PLUS INC.

Principal Place of Business Mailing Address					L DODAGODI NIO IDITO DINI DONI BONI DOFFIE	A9410 (0108 (1119 10)		101 (3) 1
3304 HAVILAND CT. STE. 302 PALM HARBOR FL 34684		3304 HAVILAND CT. STE. 302 PALM HARBOR FL 34684-1889						
					3. Date incorporated or Qualified 11/13/1996	3a. Date of t		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number 59-341304			e lied For
21	W	26 Couto Apl # ato	· •		59-341304		.75 Ad	Applicable
Sulte, Apt. 4	#, OC.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 -	Fee Req	
22 City & State		City & State			Election Campaign Financing		5.00 M	·
23		28			Trust Fund Contribution			
Zip	Country	Zψ	Country	1	8. This corporation has hability for in	njangible tax ur	nder s. 1	199.032,
24	25	29	30			【Yes ☐ No		
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	istered Agent	-	
	WELL, RICHARD C JR.		81	Namo				
	HAVILAND CT. STE. 302		82 Street Ad		ddress (P.O. Box Number is Not Acceptable)			
PALM	A HARBOR FL 34684		83					·
			84	City		FL 85	Zip Co	ode
11 Purcuent t	o the provisions of Sections 607 0502	and 607 1508 Florida Statu	ites the abov	e-named e	corporation submits this statement for the p	urpose of chan	Laina its	registered
office or re	egistered agent, or both, in the State on familiar with, and accept the obligation	if Florida. Such change was	authorized by	z the corp	oration's board of directors. I hereby accept	it the appointme	ent as re	egistered
SIGNATURE								
	Signature, typed or printed harne of registered agen			nt signature	required when reinstating)	DATE	OTODO	111 40
12.	OFFICERS AND	DIRECTORS	13.	Т	ADDITIONS/CHANGES TO OFFIC		hange	Addition
TITLE	OP DICHARD C ID	□ pticit	1.1 TITLE				Harigo	LJ Addition
NAME	STOWELL, RICHARD C JR. 3304 HAVILAND CT. STE. 302		1.2 NAME	ADDRESS				
STREET ADDRESS	PALM HARBOR FL 34684		1.4 CHY-1	ł				
CITY-ST-ZIP	DV	DELETE	2.1 TITLE		OV	⊠ (0	hange	Addition
NAME	CALHOUN, TERESAD S	_	2.2 NAME	i	Calhoun, Teresa 5	•		
STREET ADDRESS	3304 HAVILAND CT. STE. 302		2.3 STREE		CHITOTICS			
CITY-ST-ZIP	PALM HARBOR FL 34684		2.4 CHY-	ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE			c	hange	☐ Addition
NAME			3 2 NAME					
STREET ADDRESS			3.3 STREE	ADORESS				
CITY-ST-ZIP			3 4. C(1Y-	ST-ZIP				
TITLE		☐ DELETE	43 TITLE			□ 0	hange	Addition
NAME			4. 2 NAME					
STREET ADDRESS				I ADDRESS				
CITY-ST-ZIP		D. D. C. F. S. C.	4.4 CITY-1	ST - 74P			Change	Addition
TITLE		DELETE	5.1 TITLE	ł		LJV	панус	L MODRION
NAME			5.2 NAME	LADDOCOD				
STREET ADDRESS				ADDRESS				
CITY-ST-ZIP TITLE		DELETE	6.1 THE	31-711			Change	Addition
NAME			6.2 NAME				•	
STREET ADDRESS				1 ADDRESS				
CITY-ST-ZIP			6.4 CITY -	1				
44 Lela barak	by ce rtify that the information supplied	with this filing does not qua	aldy for the ex-	emption s	tated in Section 119.07(3)(i), Florida Statute	s. I further certi	fy that t	he
Informatio	o indicated on this annual report or si	applementa! annual report is the receiver or trustee empo	s true and acc owered to exe	urale and	that my signature shall have the same lega eport as required by Chapter 607, Florida S	al effect as if ma	ade und	ier oath: thai