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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000030934 (8)

ATRICIVI	E RESEARCH CONFORM	ION			
Principal Place of Business		Mailing Address			
		10741 SKYHAWK DRIVE			
		NEW PORT RICHEY FL			
					DO NOT WRITE IN THIS SPACE
·					3. Date Incorporated or Qualified
<u> </u>					04/04/1997
2. Principal Place of Business		2s. Mailing Address			4. FEI Number Applied For Not Applied For Not Applied For
Suite And Market		26			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired Section Section 5. Section 5. Section 5. Section 5. Section 5. Section 5. Section 6. Sec
City & State		City & State			
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	trv	
24	25		30	y	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
[27]	9. Name and Address of Curre		1301		10. Name and Address of New Registered Agent
				31 Name	
10741 SKYHAWK DRIVE			1		
NEW PORT RICHEY FL			-	32 Street Add	Iress (P.O. Box Number is Not Acceptable)
116	W FOR MORE! PE		ł	33	
			1		
				City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporate in the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporate in the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporate in the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporate in the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporate in the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporate in the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporate in the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporate in the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporate in the provisions of Sections 607.0502 and 607.0508, Florida Statutes, the provisions of Sections 607.0502 and 607.0508					
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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
	in iamilai with, and accept the obli	gations of, Section 607.0505, Fig.	niua siak	ies.	
SIGNATURE	Signature, typod or printed name of registered as	Goot and title if applicable (NOT)	: Registered	Agrint signature regul	ered when re-nstating) DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DEL€TÉ	1.3 117	E	Change Addition
NAME	BYBEE, MARK T		1.2 NA	AE]	
STREET ADDRESS	10741 SKYHAWK DRIVE		1.3 ST	EET ADDRESS	
CITY-ST-ZIP	NEW PORT RICHEY FL		1.4 CIT	r-ST-ZIP	
TITLE	D	DELETE	2.1 1(1)	E	Change Addition
NAME	BYBEE, DENISE		2.2 NA	1E	
STREET ADDRESS	10741 SKYHAWK DRIVE		2.3 ST	EET ADDRESS	
CITY-ST-ZIP	NEW PORT RICHEY FL		2. 4 CF	Y - ST - ZIP	
TITLE		☐ DELETE	3.1 TIT		Change Addition
NAME			3.2 NAI	4E	
STREET ADDRESS			3.3 STF	EET ADDRESS	j
CITY-ST-ZIP			3.4. 01	Y-ST-ZIP	
TITLE		DELETE	4.1 TIT		☐ Change ☐ Addition
NAME			4. 2 NA	ME	
STREET ADDRESS			4.3 STF	EET ADDRESS	l l
CITY-ST-ZIP				'-ST-ZIP	
TITLE		DELETE	5.1 TIT		Change Addition
NAME			5.2 NAI	IE	
STREET ADDRESS				EET ADDRESS	
CITY-ST-ZIP				Y-ST-ZIP	
TITLE		☐ DELETE	6.1 TIT		Change Addition
NAME			6.2 NA	ne I	
STREET ADDRESS				EET ADDRESS	

14. I 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 affactment with an address.

CITY-ST-ZIP

MAKK T. Bybee 4.27.98

FILED

May 05 1998 8:00am

Secretary of State