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

PROFIT CORPORATION **ANNUAL REPORT**



Sandra B. Mortham

Secretary of State

Feb 25 1998 8:00am

FILED

7	1998	55	DIVISION OF C	ORPORAT	IONS		Secretar	y oi Si	ate
DOCUN 1. Corporation	MENT # P9700		116 (1)	· · ·					
Principal Place	of Business	Mailin	g Address				E RODANGOU ALE IBIAN (CAES ODAN) DONS SONA DONS		1 0101 1001
9111 S.W. \$3F	RD PLACE		9111 S.W. 53RD PLACE SUITE B						
SUITE B Gainesville FL 32808			GAINESVILLE FL 32608				DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified 04/04/1997		
2. Principal Pla	aca of Business	2a. M	2a. Mailing Address				4. FEI Number	Apı	olied For
21		[26]					59-3438169		Applicable
Suite, Apt. (W, etc	} · · −1	Suite. Apt #, etc.				6. Certificate of Status Desired	_ \$8.75 A Fee Re	
City & State)		City & State				6. Election Campaign Financing	\$5.00	Мау Ве
23		28					Trust Fund Contribution	Added to	
Zip	Country 25	29	,	Coun	пу		 This corporation owes or has paid to Personal Property Tax due June 30 		No I
<u>24 j</u>	9. Name and Address of Curre	·	ed Agent				10. Name and Address of New Regis		
THOMPSON, JOHN R				Įε	Name				
	1 S.W. 53RD PLACE		82			Addres	ss (P.O. Box Number is Not Acceptable)		
	ITE B			ε	13				
GAINESVILLE FL 32606				L.					\
					Lity City			FL 85 Zip C	
office or re	anictored agout by both in the Stat	o of Florida -	Such change was a	iuthorized.	by the corr	d corpo poratio	ration submits this statement for the purp n's board of directors. I hereby accept t	pose of changing its he appointment as	registered registered
agent. Far	m familiar with, and accept the oblig	gations of, S	ection 607.0505, Flo	orida Statu	les.		, ,	• •	_
SIGNATURE	Signatine typed or profed name of regetered a	perd and little if as	splicable (NO1	E Begistered	Agent signature	e required	d when reinstating)	DATE	
12.	OFFICERS AF			13.	,		ADDITIONS/CHANGES TO OFFICER		
THILE	D		☐ DELETE	1.1 TOL				Change	Addition
NAME	THOMPSON, JOHN R 9111 S.W. 53RD PLACE, SUITE B			1.2 NAME					İ
STREET ADDRESS	GAINESVILLE FL 32608	חוב ס			EET ADDRESS '-ST-ZIP				
CITY-ST-ZIP TITLE	CHITCHTELL I E OEOOO		DELETE	2.1 T(T)		 		Change	Addition
NAME				2.2 NAN	1E				
STREET ADDRESS				2.3 STR	eet address				
CITY-S1-ZIP					Y-ST-ZIP				
TITLE			L DETETE	3 1 7171				Change	☐ Addition
NAME				3.2 NAN					
STREET ADDRESS				1	EET ADDRESS Y-ST-ZIP	1			
CITY-ST-ZIP TITLE			DELETE	4 1 111		<u> </u>		☐ Change	Addition
NAME				4 2 NA	ME				
STREET ADDRESS				43 STR	EET ADDRESS				
CITY-\$1-ZIP					- ST- ZIP	ļ			Addition
TITLE			☐ DELFTE	5 1 7171		1		Change	Addition
NAME				5 2 NAM		1			
STREET ADDRESS					EET ADDRESS (-ST-ZIP	1			
CITY-ST-ZIP TITLE			DELETE	6.1 TITI	• • • • • • • • • • • • • • • • • • • •	+		Change	Addition
NAME				6.2 NA		1			j
STREET ADORESS				6.3 STR	EET ADDRESS	1			
CITY-ST-ZIP				6.4 CIT	Y-ST-ZIP				

14. Thereby 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 attachment with an address.

2/19/98