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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mog sam

FILED Aug 26 1998 8:00am

ANNUAL REPORT 1998		ORT	Secretary DIVISION OF CO				Secretary of State
DOCUI 1. Corporatio ASTAT,		# P970	0003382	3 (0)			
	_						
Principal Place of Business			Mailing Address				1 (881/88) (18 181/1 184/1 88/1 88/1 88/1 88/1 88/1
480 N WILLIA			3206 S HOPKINS AVE. SUITE 72				
TITUSVILLE F	L 32/96		TITUSVILLE FL 32781				DO NOT WRITE IN THI S SPACE
							3. Date Incorporated or Qualified 04/14/1997
2. Principal P	la ce of Busin	ess	2a. Mailing Address				4. FEI Number Applied For
Suite, Apt. #, etc.				Suite, Apl. #, etc.			59-3445482 Not Applicable
22 27				, 6(5)			5. Certificate of Status Desired Fee Required
City & State City & State 23 28				ate			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip		Country	7ip	-	Country		8. This corporation owes or has paid the current year intangible
24		25 29 30 p. Name and Address of Current Registered Agent		վ		Personal Property Tax due June 30. Yes No. 10. Name and Address of New Registered Agent	
MC	DANIEL, P.		HOLL HOBISTOIGN AND	3111	81	Name	
	06 \$ HOPKI				82	Direct	Address /DO Day Mushas in May Acceptable)
TITU\$VILLE FL 32780					62	Street	Address (P.O. Box Number is Not Acceptable)
					83		
					84	City	■■ 85 Zip Code
4. D.	7. 10	76-45-607	0.00 4.00 1	The Control of	th a ab		[-1_ }
office or r	re gis tered ag	ent, or both, in the S	tate of Florida. Such a	change was auth	orized by	the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
	anı tamıllar Wi	п, апи ассері іне оі	oligations of, Section	607.0505, FIONO	a Statutes	S.	
SIGNATURE	Signature typed		t agent and title if applicable	(NOTE: Re	ngistered Age	ent signature	e required when roinstaing) DATE
12.		OFFICERS	AND DIRECTORS	DOLLETT	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE			L	DELETE	1.1 TITLE	í	President Change Addition
NAME STREET ADDRESS	İ				1.2 NAME 1.3 STREET	ADDRESS	Turner A. Tribble
CITY-ST-ZIP					1.4 CHY-S		Titusville, FL 32796
TITLE				DELETE	21 TITLE	****	V.P. Sec., Trees Change Addition
NAME					2.2 NAME		V.P., Sec., Trees ANNette S. Tribble 1630 East et
STREET ADDRESS	}				2.3 STREET	ADDRESS	1630 Bast Ct
CITY - ST - 7IP				Dr. Fre	2.4 CITY-5	ST-ZIP	Titus ville, FZ 32796
TILE			L	DETELE	3.1 TITLE	- 1	Change Addition
NAME STREET ADORESS					3.2 NAME 3.3 STRELT	ADDRICE	
CHY-SI-7IP					3.4. CITY - S	í	
TITLE				DELETE	4.1 TO LE		Change Addition
NAME	l				4. 2 NAME	1	
STREET AUDRESS					4 3 STREET	ADDRESS	
CITY - ST - 7IP		- 	— ——— —	1 priese	4.4 City - S	1 - ZIP	
TITLE			L	_] DELETE	5.1 THLE	ļ	700002625577 -08/26/9801048033
NAME OTDEET ANNOESS					5.2 NAME	ADDRESS	-08/26/9801048033
STREET ADDRESS CITY-S1-7IP					5.3 STREET 5.4 City-S		***150.00
TITLE				DELETE	61 THLE		Change Addition
NAME					6.2 NAME		nc
STREET ADDRESS					6.3 STREE1	ADDRESS	46,1
CITY-ST-ZIP			3		6.4 CITY-S		od in Section 119 07/(3//i) Florida Statutes I further cortifu that the information

receive being that me mormation supplied with this tining does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 trusted 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.

...to & sie

407-268-5931