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 # P97000057845 (4)

BEN COOPER & ASSOCIATES, INC.

FILED Apr 23 1998 8:00am Secretary of State



					B (0)
Principal Place of Business Mailing Address					
		3909 E BAY DRIVE STE 110	0		
HOLMES BEACH FL 34217		HOLMES BEACH FL 34217		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				06/30/1997	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26 P.O. Box 1177		68-23/7/83	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		27			Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 HOLMES DET	Country	Trust Fund Contribution	Added to Fees
24	25		MANATE	 This corporation owes or has paid the Personal Property Tax due June 30. 	current year intangible
	9. Name and Address of Curren		U 11 11 11 11 11 1 14	10. Name and Address of New Registers	
COOPER, BEN A 3909 E BAY DRIVE STE 110 HOLMES BEACH FL 34217			81 Name		
			82 Street	Address (P.O. Box Number is Not Acceptable)	
			62) Sireer	Address (F.O. Box Number is Not Acceptable)	
			83		
			84 City		85 Zip Code
			Gily City	F	L 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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.					
SIGNATURE					
Signature typed or printed name of repistured agent and little if applicable (NOTE Registered Agent signa 12. OFFICERS AND DIRECTORS 13.				required when reinstating) ADDITIONS/CHANGES TO OFFICERS A	
TITLE	OF FIGURE AND	DELETE	1.1 TITLE	PRESIDENT	Change Addition
NAME		<u></u>	1,2 NAME	Dan A CAD DER	
STREET ADDRESS			1.3 STREET ADDRESS	11441 PERICO ISLE CIRCL	€ 8
CITY-ST-ZIP	r.		1.4 CITY-ST-ZIP	BRADENTON, FL 34209	ָב <u>וֹ</u>
TITLE	-	DELETE	2.1 TITLE	GREWATHEM	☐ Change 🔀 Addition C
NAME			2.2 NAME	KAREN COOPER	
STREET ADDRESS			2.3 STREET ADDRESS	KAREN COOPER LIVE PERICO ISLE CIRCLE	
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	BRAGENTON, FL 34209	
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		İ
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DOLLETE	4.4 CITY - ST - ZIP		Change Addition
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME OTDEET LODGECC	•		5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME		breen	6.2 NAME		em coming [m] rading):
			6.2 NAME 6.3 STREET ADDRESS		
STREET ADDRESS					
CITY-ST-ZIP	antificth at the information avention	11. (1.1. £1)	6.4 CITY-ST-ZIP	d in Continue 440.07/20/11 Florido Chatutas I fudhas	

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 informatio indicated on this annual report or supplemental annual report is true and occurate 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 roceiver 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.