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

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF

Sandra B. Mortham ...

Secretary of State
DIVISION OF CORPORATIONS

	MENT # P9700 NG ADVANCED SERVICES	0077520 (9) , inc.	)							
Principal Place	a of Business	Mailing Address			·		<b> </b>		<b>4</b> 44 <b>00</b> 14 <b>100</b> 1	
1239 LAZY LAKE ROAD WEST DUNEDIN FL 34698		1239 LAZY LAKE ROAD WEST DUNEDIN FL 34698				DO NOT WRITE IN TH	HIS SPACE			
						1	orated or Qualified			
9 Principal C	lace of Business	2a. Mailing Address				09/05/19 4. FEI Numbe		<del></del>		
21	iace of boshloss	26. Walling Address					3468962	<del></del>	pplied For ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					Status Desired	\$8.75 Additional Fee Required		
City & State	9	City & State				6. Election Ca	mpalgn Financing		May Be	
23		28]				Trust Fund	· · · · · · · · · · · · · · · · · · ·		to Fees	
Žiρ	Country	Zφ	Cou	ntry			ation owes or has paid the			
24	25	29	[30]				operty Tax due June 30.		_] No	
OT/	9. Name and Address of Curre	nt Registereo Agent		B1 /	Name	10, Name and	Address of New Register	eu Agent		
STANANOUGHT, CINDY L 1239 LAZY LAKE ROAD WEST			ļ							
DUNEDIN FL 34698				82	Street Addr	ress (P.O. Box Nun	ber is Not Acceptable)			
	1125111 12 01000		ľ	83						
				84	City			- 85 Zip	Code	
			- 1		•			▀▋▃▕▏▕▎ <b>▕</b>		
office or ragent 1 a SIGNATURE	to the provisions of Sections 607.05 egistered agent, or both, in the Stalem familiar with, and accept the oblig signature, typed or printed name of registered as					red when reinstating)	DAY	TE.		
TITLE	DPST	DELETE	1.1 10	LE		ADDITIONS	DIANGES TO OFFICERS	Change	Addition	
NAME	STANANOUGHT, CINDY L		1.2 NA							
STREET ADDRESS	1239 LAZY LAKE ROAD WES	ST	1.3 STI	REET A	ADDRESS					
CITY-ST-ZIP	DUNEDIN FL 34698		1.4 Cff	Y-ST	I-ZIP					
TITLE		☐ DELETE	2 1 TIT	LE				☐ Change	Addition	
NAME			22 NA		Ì					
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP TITLE		DELETE	2.4 CI		r- ZIP			☐ Change	☐ Addition	
NAME		LJ DECEL	3.1 M					- vilango		
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			3.4. CI							
TITLE		DELETE	4.1 TiT					Change	Addition	
NAME			4.2 N/	ME	İ					
STREET ADDRESS			4.3 ST	REET A	ADDRESS					
CITY-ST-ZIP			4.4 CIT		- 2IP					
TITLE		☐ DELETE	5.1 TIT		1			Change	Addition	
NAME			5.2 NA		ļ					
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		☐ DELFTE	5.4 CIT		- ZIP		· ··· · · · · · · · · · · · · · · · ·	Change	Addition	
TITLE		□ pettit	6.1 117	LŁ	- 1			CT CHAINE	L. ROOMON	

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 oranged, or on an attachment with an address.

6.3 STREET ADDRESS

SIGNATURE: (111dul Stauchander

STREET ADDRESS

2-20-98

R2E034 (10/97)

**FILED** 

Mar 09 1998 8:00am

Secretary of State