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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

FILED May 26 1998 8:00am Secretary of State

	1998	18.30	DIVISION OF (CORPORAT	10	INS				
DOCU	MENT # P970000	8849	54		,-,-					
	ARTIN, INC.									
	HICITING I AIC.					•	•			
Principal Plac	on of Business	М	ailing Address				+			
i , '				Ē						
1000 E. DAT DILVE, SOTIE OR							DO NOT WEE	TE IN THIS	CDACE	
LANCO	, FL 33771						3. Date Incorporated or Qualified		SPACE	
i	•						10-13-97			
	Place of Business	2a.	Mailing Address				4, FEI Number		XA	pplied For
21		26	· · · · · · · · · · · · · · · · · · ·							ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	Ø		Additional
22 City & State			City & State				- Manual According to the contract			beniupe
23		28	Only a blate				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country		Zip	Count	ry		B. This corporation owes or has	paid the cu		····
24	25	29		30			Personal Property Tax due Jui	ne 30.	Yes [□ No
	g. Name and Address of Curre	nt Regis	tered Agent				10. Name and Address of New I	legistered	'Ağent	
1 1	LLEN KIMMITT, JA.			8	'	Name				
233 THIRD ST. N., #101				8:	82 Street Address (P.O. Box Number is Not Accep			able)		
1	•			8:	3					······································
57.	PRTANSBUNG FL 33	701		8	+	City			85 Zip	Code
					_			<u> </u>	<u>- </u>	
11, Pursuant office or	to the provisions of Sections 607 05 requireged agent, or both, in the State	02 and 6 e of Flore	07.1508, Florida Statuti da Such change was a	es, the about	ve-	 named corporation 	pration submits this statement for the on's board of directors. I hereby acc	purpose o	of changing it pointment as	is registered registered
agent La	am familiar with, and accept the obli	gations o	f, Section 607.0505, Flo	orida Stalule	98.		,			
SIGNATURE	Signature Peped or posited name of requirement in	gent and little	d applicable. (NOT)	E Argistoird Ai	peni	ni signature required	d when reinslating)	DATE		
12.	OFFICERS A	VD DIREC		13.	_		ADDITIONS CHARGES TO OU	u i thi Anj	BIMLECTO	ns 1M 10
THEF	PRESIDENT		DELÉTE	1.1 TITLE			•	\	Change	Addition
NAME	LARRY B. MARTIN			1.2 NAME				`		
STREET ADDRESS CITY-ST-7IP	250 SUNSET DRIVE	200	.	1.3 STREE						
TALL	BROOKSVILLE, FLORIDA	376	DELETE	1.4 CiTY- 2.1 TITLE	21.	. 21		····	Change	Addition
NAME	İ			2.2 NAME						
STREET ADDRESS				2.3 STREE	T A	DORESS				
CITY-ST ZIP				2. 4 CITY-	ST	- ZIP				
TOLE			☐ DELETE	3.1 TITLE		İ			Change Change	☐ Addition
NAME STREET ADDRESS I				3.2 NAME 3.3 STREE		pporce				
CITY ST 7IP				3.4. CITY-						
THTLE			C DELETE	4.1 TITLE	<u> </u>			······	Change	Addition
NAME				4. 2 NAME		1				
STREET ADORESS				4.3 STREE	T AI	DORESS				
CITY-ST-7IP	 		T Select	4.4 CITY-1	ST-	21P				F-1.455
TITLE NAME			☐ DELETE	5.1 TITLE		İ			Change	Addition
STREET ADDRESS				5.2 NAME 5.3 STREE	1 AF	nnocce			\sum_{i}	126
CITY-ST-ZIP				5.4 CITY-					- 3	<i>ا.</i> ``)\
TITLE			☐ DELETE	61 TITLE	-				Change	Addition
NAME				6.2 NAME			100002537 -05/27/9801108-	671	,	
STREET ADDRESS				6.3 STREET	T AD	DORESS	-05/27/9801108-	-009		
CITY-ST-ZIP				6.4 CITY - 5	ST-	ZIP	***158.75			!

14. I hereby certily 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 eath; that I am an officer or director of the corporation of 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 first an address.