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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S09670

(8)

Principal Place of Business Mailing Address							
2536 COUNTRYSIDE BLVD. CLEARWATER FL 34623		2536 COUNTRYSIDE BLVD. CLEARWATER FL 34623-1633					
					 Date Incorporated or Qualified 10/29/1990 	3a. Date of Last 02/09/1996	Report
2. Principal Place of Business		2a. Mailing Address			4, FEI Number	}	Applied For
21 Suite Ant # ele		Suite Ant. #. etc.		59-3036017	59-3036017 Not Applicable \$8.75 Additional		
Suite, Apt #, etc.		27		5, Certificate of Status Desired		Additional Required	
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country		Zip Country		This corporation has liability for intangible tax under s. 199.032,		
24	25 29 30		<u> </u>		Florida Statutes Yes No		
	g. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Reg	Jistered Agent	
	idna, Heather L		81	Name			
2536 COUNTRYSIDE BLVD SIXTH FLOOR			82	Street Add	ddress (P.O. Box Number is Not Acceptable)		
	n floor Arwater fl 34823		63			**************************************	
			84	City		FL 85 Zip	Code
11 Pursuant	to the provisions of Sections 607 050	12 and 607 1508. Florida Statut	as the abov	e-named cor	povation submits this statement for the n		its registered
office or n agent. La	egistered agent, or both, in the State in familiar with, and accept the oblig	of Florida Such change was a ations of Section 607.0505, Flo	authorized by orida Statute	y the corpora s.	poration submits this statement for the pration's board of directors. I hereby accep	t the appointment a	s registered
SIGNATURE	Signature, typed or printed name of registered ap-	not and the diagraphs (NOT	F: Registered An	ent Bionalure requi	krad when reinstating)	DATE	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	RS IN 12
THLE	PSDT	DELETE	1.1 TITLE			Change	Addition
NAME	BOESCH, GARY R.		1.2 NAME				
STREET ADDRESS	2536 COUNTRYSIDE BLVD.		1.3 STREET	T ADDRESS			
CITY+S1-ZIF	The state of the s		1.4 C/TY-5	ST - ZIP			
TITLE	VP	DELETE 2.1				Change	Addition
NAME	DOLOGIA, ILBINIARIII IVI SII		2.2 NAME				
STREET ADDRESS			2.3 \$TREET 2. 4 CITY-				
CHY-ST-ZIP TITLE	CLEARWAIEN FL	LEANWAIER FL 2.4		Si-ZIP		☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADORESS			
C(TY - ST - ZIP			3.4. CITY-	ST-ZIP			
TITLE	10-74-7	DELETE	4.1 TITLE			Change	Addition
NAME			4.2 NAME		•		
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY - ST - ZIP			44 CITY-	ST-ZIP			
TOLE		L DELETE	5 1 TITLE	}		Change	Addition
NAME			5.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-7P TITLE		DELETE	5.4 CITY - 1 6.1 YITLE	51-4P		Change	Addition
NAME		Deter	6.2 NAME	-		time One igo	***************************************
STREET ADDRESS				T ADDRESS			
CHY-ST-ZIP			6.4 CITY -				
14. I do heret	by certify that the information supplie	d with this filing does not quali			d in Section 119.07(3)(i), Florida Statutes	s. I further certify the	at the
Informatio Lam an o appears i	on indicated on this annual report or s flicer or director of the comporation of n Block 12 or Block 13 if charged, c	supplemental annual report is to the receiver of rustee empoy or on or attackment with an add	rue and acc ress.	urate and tha oute this repo	d in Section 119.07(3)(i), Florida Statuter at my signature shall have the same legal ort as required by Chapter 607, Florida S	enect as if made u tatutes; and that my	noer oath; that name

Gary R. Boesch, Pres

2/19/97

(813)726-0726

FILED

Feb 25 1997 8:00am

Secretary of State