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		Apr 07 1997 8:00am Secretary of State
DOCU t. Corporation MS. BET	•	(7)		
Principal Place of Business Mailing Address 2801 ESTERO BLVD STE. J. 2801 ESTERO BLVD ST FT. MYERS BEACH FL 33931 FT. MYERS BEACH FL 3				
2. Principal F	Place of Business	2a. Mailing Address		3. Date Incorporated or Qualified 02/21/1991 3a. Date of Last Report 04/29/1996 4. FEI Number Applied For
21	race of the reso	26]		65-0244633 Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired Security Securi
City & Star	lė	City & State	······································	6. Election Campaign Financing \$5.00 May Be
23 Z(p)	Country	Z Ip	Country	Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,
24	[25]	29	30	Florida Statutes Yes No
NOR	 Name and Address of Currer MAN J. LANGLOIS 	nt Registered Agent	61 Name	10, Name and Address of New Registered Agent
2801 ESTERO BLVD., #J				Address (P.O. Box Number is Not Acceptable)
FT. 1	MYERS FL 33931			(udios) (i.v. pox named is not zeooptable)
			83	
ı			84 City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	22 and 607.1508, Florida Statute	s, the above-named	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
agent. La	em familiar with, and accept the oblig	ations of Section 607.0505, Flo	ida Statutes.	orations volid or directors. Thereby accept the appointment as registered
SIGNATURE	Stprature, type-dior profiled nation of registered agr	err and tille if applicable (NOTE	Registered Agent signature	required when reinstating) DATE
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1/1LE NAME	LANGLOIS, BETH A	☐ DELETE	1.1 TITLE 1.2 NAME	Change Addition
STREET ADDRESS	8200 SUMMERLIN VL, #104		1.3 STREET ADDRESS	
CITY - ST - 74P	FT. MYERS FL		1.4 CITY - ST - ZIP	N.J. LANGLOIS
THE	DPT	☐ DELETE	2.1 TITLE	14300 Hickory Links Ct. #1822 Change Addition
NAME STREET ADORESS	LANGLOIS, NORMAN J -4753-ESTERO BLVD.; #505		2.2 NAME 2.3 STREET ADDRESS	14300 Hickory LINES CF. # 1812
CHY-SI-ZIF *	FT. MYERS BEACH PL		2.4 CITY - ST - ZIP	14. MYBOS PL 33912
THLE	D	DELETÉ	31 TITLE	Fort Myers, FL 33912 14300 Mickory Links Ct. Wiele Change Addition 14300 Mickory Links Ct. 4 1812
NAME	LANGLOIS, MARTHA L 4753 ESTERO BLVD., #505	_	32 NAME	14300 Hickory Links Ct. A 1882
STREET ADDRESS	EL MYERG BEACH FL		3.3 STREET ADDRESS	Pet HUS - 1 22012
C:TY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	Change Addition
NAME		 -	4. 2 NAME	_ · _
STREET ADORESS			4.3 STREET ADDRESS	
CITY-S1-7P		Lincipte	4.4 CITY - ST - ZIP	T Phonon F 1 bases
TUSUE NAME		☐ DELETE	5.1 TITLE 5.2 NAME	Change Addition
STREET ADDRESS			5.3 STREET ADDRESS	
C-11 - S1 - 20F			5.4 CITY-ST-ZIP	
TITLE		DELETE	61 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS	}		6.3 STREET ADDRESS	· ·
CITY - S1 - 7/51	1		64 CITY - ST - ZIP	

14. I do 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 I changed, or on an attachment with an address.

FILED

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