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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # S67859 (6) ROCHELLE DEVELOPMENTS, INC.					
rincipal Place o	of Business	Mailing Address		T HANDHAND IN BUHAN HANDA MANDA	i fåje filleti deltet åtibit bildse andre ardet ebbt
P. O. BOX 512 HOMOSASSA SPRINGS FL 32647		700 YORK STREET LONDON ON MSW 2-8			
		US		 Date incorporated or Qualified 07/22/1991 	3a. Date of Last Report 04/03/1995
Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
		26		59-3084903	Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
03 - 8 01-1-		City & State		Election Campaign Financing	\$5.00 May Be
City & State		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zıp	Country	8. This corporation has liability for in	
<u> </u>	25	29 N5W 058	30 CANADA	Florida Statutes Yes 10. Name and Address of New Re	
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New H	egistered wgent
			1-1		
ABBOTT, GLEN C.			82 Street Ac	dress (P.O. Box Number is Not Acceptabl SUNCOAST BOULEVARD	(6)
	FORT ISLAND TRAIL		83	. Dolloonsi Dobbaville	
SUITE /	a Al river fl 32629		1 1 0		85 Zip Code
			84 City CRYST	AL RIVER	FL 34429
 Pursuant te 	o the provisions of Sections 607.050	02 and 607.1508, Florida Statute	s, the above-named corp	oard of directors. I hereby accept the 2000	nintment as registered agent. I am
familiar wit ISNATI IBE	o the provisions of Sections 807.05t ed agent, or both, in the State of Fic h, and accept the obligations of, Se Signatury typed or printed name of registered agr	ction 607.0505, Florida Statutes.	s, the above-named corp d by the corporation's b E: Registered Agent signature req	poration submits this statement for the pur pard of directors. I hereby accept the apportunity of the apport	DATE.
familiar wit	h, and accept the obligations of, Se Signaturu typod or printed name of registered ago	ont and title if applicable (NOT ND DIRECTORS	E: Registered Agent signature req	ured when reinstating! ADDITHONS/CHANGES TO OFFI	DAYE CERS AND DIRECTORS IN 12
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SIGNATURE:

CHRIS SI SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHRIS SPECHT APRIL 10, 1996 (519)438-3691

CR2E034 (12/95)