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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 27 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$70874

(0)

Principal Placi	e of Business	Mailing Address		·····			
SUITE 4 BRADENTON FL 34209-9526			26				
SAMÁSOTA FL	34237	US			3. Date Incorporated or Qualified 06/05/1991	3a. Date of L. 04/30/19	
	Principal Place of Business 2a. Mailing Address				4. FEI Number	-	Applied For
21 760 7 Suite Apt	1 19th Ave N.W.	Suite, Apt. #, elc.			65-0275145	- \$8	Not Applicable 75 Additional
22		27			5. Certificate of Status Desired	T	ee Required
City & State City & State					6. Election Campaign Financing		.00 May Be
23 5000	101140n, +L	28	Country		Trust Fund Contribution		ided to Fees
24 343	Country (25 /) (5-/)	Ζιρ (29)	Country 30		8. This corporation has liability for in Florida Statutes	intangible tax und Yes 🌃 No	der s. 199.032,
24 ~ (2)	9. Name and Address of Curren		1301		10. Name and Address of New Re		
FER	RELL, JOSEPH C.		81	Name			
	19TH AVENUE, NW		82	Street Addr	ress (P.O. Box Number is Not Acceptab	ile)	
SUITE			83				
BRA	DENTON FL 34209		23				
			84	City		FL 85	Zip Code
office or r	registered agent, or both, in the State im familiar with, and accept the obligation of the state	of Florida Such change was ations of, Section 607,0505, F	authorized by lorida Statutes	the corporat	poration submits this statement for the plion's board of directors. I hereby acception when reinstating	ot the appointme	nt as registered
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC		CTORS IN 12
TITLE	OD	☐ DELETE	1.1 TITLE			Cha	ange Addition
NAME	GILLETT, CHRISTOPHER R.		1.2 NAME				
STREET ADDRESS	, , , , , , , , , , , , , , , , , , ,		1.3 STREET				
CITY ST ZIP TITLE			1.4 CITY - ST 2.1 TITLE	- ZIP		Ch	ange Addition
NAM!			2.2 NAME				
STREET ADDRESS	7607 19TH AVENUE, NW		2.3 \$TREET	ADORESS			
CITY - ST - ZIP	BRADENTON FL		2 4 CITY - S	1-ZIP			
TIFLE		☐ DELETE	3 1 TITLE			∐ Ch	ange L Addition
NAME			3 2 NAME	100000			
STREET ADDRESS			3.3 STREET . 3.4. CITY - S				
CHY-ST-ZIP TITLE		DELETE	4.1 FITLE	1-ZIF		☐ Ch	ange Addition
NAME:			4.2 NAME	Į			
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP		- 12202	4.4 CITY - ST	- ZIP			
TITLE		DELETE	5.1 TITLE			□ Ch	ange
NAME OZOSEL ADDRESS			5.2 NAME	1000500			
STREET ADDRESS			5.3 STREET	1			
CITY - S1 - ZIP TITLE		☐ DELETE	61 TITLE	I LIF		□ Ch	ange
NAME		—	62 NAME				•
STREET ADDRESS			63 STREET	address			
			0.4.00714.00				

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 if changed or on an attachment with an address.

SIGNATURE

WAS USED OF PRINTED AME OF SIGNING OFFICER OF DIRECTOR PROPERTY DUE DO OFFICER OF DIRECTOR