FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUN 1. Corporation TORF		34 (4)			
Principal Place of Business 2470 PALE TIGER COURT TALLAHASSEE FL 32308		Maling Address 2470 PALE TIGER COURT TALLAHASSEE FL 32308		A 1884/2016 IN 1881 & HERT (1888 IN 1818) BIRN STOLE S	
				3. Date Incorporated or Qualified 08/13/1991	3a. Date of Last Report 01/13/1995
Principal Place of Business		2a. Mailing Address 26		4. FEI Number 59-3080623	Applied For Not Applicable
Suite, Apt. #. etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Ζφ 29	Country 30	8. This corporation has liability for	
Z.11	9. Name and Address of Current		81 Name	10. Name and Address of New R	
227 S.	, Carolyn D. . Calhoun Street Hassee Fl			ess (P.O. Box Number is Not Acceptat	FL 85 Zip Code
or registere familiar with SIGNATURE	Hand Ton Land Survived all into OFFICERS AND	i. Such change was authorize n 607.0505, Florida Statutes. id premarentalis (NOI DIRECTORS	d by the corporation's licear E. Registered Agent segment response 13.	rd of directors. Thereby accept the app	ointment as régistered agent. I am LAG DATE ICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDIRESS CITY - ST - ZiP	PST LIVINGSTON, R. GARY 2470 PALE TIGER COURT TALLAHASSEE FL	□ DELEIE	1. 1 T-ILE 12 NAM: 1.3 SIMEET ADDRESS 1.4 CHY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIVINGSTON, R. GARY 2470 PALE TIGER COURT TALLAHASSEE FL	€ DELETE	2 1 THLE 22 NAME 23 STREET ADDRESS 24 CHY-S1-7H	· · · · · · · · · · · · · · · · · · ·	Change Addition
TITLE NAME STREET ADDRESS CITY STAZIE	THE TOOLETE	DETELE	3.1 TILE 32 NAME 33. STREET AUDRESS 34. CHY-ST-7IP		Change Addition
TITLE NAME STREET ADDRESS		DELEHE """"	4 1 THEE 4.2 NAME 4.3 STREET ADDRESS		☐ Charige ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DETELE	4.4 CHY-S1-7IP 5.1 HULF 6.2 NAME 5.3 STREET ADDRESS		Change Addition
CHY-ST-ZIP TITLE NAME STREEL ADDRESS CHY-ST-ZIP		□ Defete	6 1 TITLE 6 2 NAME 6 3 STREET AUDRESS		☐ Criange ☐ Addition
certify that oath; that I	y certify that the information supplied with the information indicated on this armual amign officer or director of the corpora Block 12 or Block 13 if changed, or on	I report or supplemental annu- ition or the receiver or trustee	al report is true and accura empowered to execute thi	te and that my signature shall have the	same legal effect as if made under

SIGNATURE:

Robert G. LIVINGSTON
SIGNING OFFICER OR DIRECTOR

4-4-86

904 668-3070 Daytinia Phone #