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CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$89624

(8)

Principal Place 7801 S.E. 5811 P. O. 80% 1478 OCALA FL. 444	H AVENUE	Mailing Address 7801-9-E. 50711 AVENUE P O BOX 1476 OCALA FL 34478-1476							
						3. Date Incorporated or Qualified 10/24/1991		ate of Last F <b>/25/1996</b>	Report
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		<del></del>	oplied For
1		26				59-3084041			ot Applicable
= S⊌te, Apt : □	#, elc	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired
2) City & State	9	City & State				6. Election Campaign Financing			May Be
3		28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Cor	ıntry		8. This corporation has liability for			. 199.032,
344		29	30	<del></del>			Yes		
	g. Name and Address of Curre	nt Registered Agent		81 Na		10. Name and Address of New F	Registered	Agent	
	WARD, JAMES K.			81 Na	me				
	9 SE 7TH ST			82 Str	eet Addre	ss (P.O. Box Number is Not Accept	able)		
UC	ALA FL 34471			63	<del></del>	, <del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>		<del></del>	<del></del>
				84 Cit	у		FL	85 Zip	Code
14 Pursuant	to the provisions of Sections 607 06	02 and 607 1508. Florida Stati	ites the a	hove-par	ned corpo	ration submits this statement for the		Changing i	its registered
SIGNATURE	to the provisions of Sections 607.05 agistered agent, or both, in the Stat in familiar with, and accept the oblig Signature typed or probe more of registered ag					d when reinstaling)	DATE		
12,		ND DIRECTORS	13.		.,	ADDITIONS/CHANGES TO OFF	ICERS AN	DIRECTO	RS IN 12
1171.6	PD	DELETE	1.1 70	ITLE	I I			Change	Addition
AME	LEEWARD, JAMES K.		12 N		- [				
STREET ACORESS	2409 SE 7TH ST								
	OCALA EL			Treet addr		2007)			
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ITLE	V\$T	DETELE	1.4 C 2.1 J	ITY-ST ZIP		3447/	· · · · · · · · · · · · · · · · · · ·	Change	Addition
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DTLE NAME STREET ADDRESS DTY- ST-ZIP DTLE NAME	VST LEEWARD, DIRK J 7801 SE 58TH AVE		1.4 C 2.1 T 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N	TITY - ST ZIP TITE TAME TREET ADDR CITY - ST ZIP TITLE TAME			:		~* ·
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CITY-ST-ZIF TITLE NAME STREET ADDRESS	VST LEEWARD, DIRK J 7801 SE 58TH AVE	DELETE	14C 21T 22N 23S 2.4C 31T 32N 34.C 41T 4.2F 4.3S 4.4C 5.1T 52N 5.3S 5.4C 6.1T 6.2N	ITY-ST ZIP  ITLE  IAME  TREET ADDR  ITLE  IAME  ITREET ADDR  ITLE	ESS ESS		·	Change Change	Addition  Addition
ITLE  IAME STREET ADDRESS DITY ST. ZUP  ITLE	VST LEEWARD, DIRK J 7801 SE 58TH AVE	DELETE	1.4C 2.1 T 2.7 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 F 4.3 S 4.4 C 5.1 T 5.2 N 5.3 S 5.4 C 6.1 T 6.2 N 6.3 S	ITY-ST ZIP  ITLE  TABLET ADDR  CITY-ST ZIP  ITLE  LIAME  LITEET ADDR  CITY-ST-ZIP  ITLE  LIAME  LITEET ADDR  CITY-ST-ZIP  LIAME  LITEET ADDR	ESS ESS			Change Change	Addition  Addition

Information indicated on this annual report or supplier many obesity 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 of 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 or an efficient with an address.

SIGNATURE: BY:

Dirk J. Leeward SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED** 

Apr 21 1997 8:00am

Secretary of State