## 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** 

DOCUMENT # S92104

(6)

SOUTHERN ANGLER, INC.

Principal Place	a at Rusinass	Mailing Address							
3585 S.E. ST. LI STUART FL 3499 US	UCIE BLVD.	3585 S.E. ST. LUCIE BLVD. STUART FL 34997 US	3585 S.E. ST. LUCIE BLVD. STUART FL 34997						
						3. Date Incorporated or Qualif 11/04/1991		- Date of Last R 10/29/1996	eport
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number 65-0294169		}	plied For of Applicable
Suite, Apt	#, etc	Suite, Apt #, etc				5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State	0	City & State	,			Election Campaign Financia     Trust Fund Contribution	ng 🗀	\$5.00 Added	
Zıp	Country	Zip	Cou	ntry		8. This corporation has liability		gible tax under s	<del></del>
24	9. Name and Address of 0		30			Florida Statutes  10. Name and Address of New	Yes		
DC)		Durrent Registered Agent		81	Name	10. Halle BIN Addition of the	u neglele	red Agent	
DEVITO, EVE 1369 DYER POINT RD.									
	I CITY FL 34990		82 Street Add			dress (P.O. Box Number is Not Acceptable)			
I CAN	101111604000			83				<del></del>	
				84	City			<b>85</b> Zip (	Code
		07 0502 and 607 1508, Florida Statute						F-L	
office of r agent. I a SIGNATURE	egistered agent, or both, in the m familiar with and accept for Signature types a proved accept et regist	e State of Florida, Such change was a pobligations of, Section 607 0505, Flore that the state of	rida Stat L	utes <b>)</b> e	Vito	quired when reinstating)	/-/	8-97 TE	
12.		RS AND DIRECTORS	13.			ADDITIONS/CHANGES TO C	OFFICERS		
TIT; E	P PROFES PROFES	LJ DELETE	1.1 717	TLE				∟ Change	Addition
NAME	DEVITO, RICHARD		1.2 NA						
STREET ADDRESS	502 EDGEWOOD STUART FL 34997		1		ADDRESS				
CITY-S1-7P TITLE	VP	DELETE	14 CI 2 1 Tr		- ZIP	· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME	DEVITO, PATRICIA		22 N/						
STREET ADDRESS	502 EDGEWOOD				ADDRESS				
CITY-ST-ZIP	STUART FL 34997		2 4 CITY - ST - ZIP						
THTLE		DELETE	3.1 10					Change	Addition
NAME			3 2 NA	AME					
STREET ADORESS			3.3 \$1	REET.	address				
CITY+ST ZIP			3.4. C		T-ZIP		<del>.</del>		
TITLE.		L DELETE	4.1 T/					L. Change	Addition
NAME EXPERT ADDOCAGE			4. 2 N		100bccc				
STREET ADDRESS					ADDRESS				
CHY-ST ZIP		DELETE	4.4 CI 5.1 TI		ı-zır			Change	Addition
NAME		L Other)	5.2 N/					o.w.go	
STREET ADDRESS					AODRESS				
CITY - S1 - ZIP			5.4 CI		[				
TITLE	·	☐ DELETE	6.1 TI					Change	Addition
NAME			6.2 N/	AME					
STREET ADDRESS			6.3 ST	TREET	ADDRESS				
CITY - ST - ZIP			6.4 CI						
aformatic Lam an o	in indicated on this annual repi Hicer or director of the corpora	upplied with this filing does not qualif ort or supplemental annual report is ti stion or the receiver or trustee empow ged, or on an attachment with an add	ue and a ered to e	accu	rate and th	hat my signature shall have the same	legal efte	ect as if made un	der oath; that

SIGNATURE:

**FILED** 

Jan 28 1997 8:00am

Secretary of State

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