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



FLORIDA DEPARTMENT OF STATE

	NNUAL REPORT 1998		Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			Secretary of State			
	MENT # S	693550 ED PROPERTIE	(9) s, inc.			LIARNAM KA ARRA		? ??!!	ii ii ii ii ii
Principal Plac	o of Rusiness		Mailing Address				4101 DITO DITIL DON DIBID))]]]]	
•									
ATTN: HOWARD FREDIN 2245 MCGREGOR BLVD			ATTN: HOWARD FREIDIN 2245 MCGREGOR BLVD						
FT MYERS FL 33901 US			FT MYERS FL 33901 US			3. Date Incorporated	O NOT WRITE IN TH	IIS SPACE	
Uð			uş			11/12/1991	Di Quanneo		
2. Principal Place of Business			2a. Mailing Address			4. FEI Number		Ai	oplied For
21			26			65-0307260		N(ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Statu	s Desired		Additional
City & State			City & State						equired
23			28			Election Campaign Financing Trust Fund Contribution Added to Fees			
Zip	Cour		Zip	Cou	intry	8. This corporation o			
24	25	2		30		Personal Property	•] No
	g, Name and Add	ress of Current Re	gistered Agent			10. Name and Addre	ss of New Register	ed Agent	
RAGAN, DEANNA K. 81 Name 44						Howard FRO	31020		
1458 BRYON RD.					82 Street	dress (P.O. Box Number is	Not Acceptable)		
SHILLING ET AVERS EL 22010						345 Mebr	131	<i>vo</i>	
FI.	MYERS FL 33919				l t			····	
					84 Cit/2	heers	F	L 85 2ip	Code
11. Pursuant	to the provisions of Se	omns 607.0502 and	607.1508, Florida.Statu	tes, the a	bove-named	orporation submits this state			
office or r	egistered agent, or bo im familiar with and a	thain the State of Fig ecept the obligations	orida. Such change was i of, Section 607.05 <mark>05,</mark> Fi	autnorize orida Stat	a by the corp tutes _a	orperation submits this state ration's board of directors. I	nereby accept the a	appointment as	registered
SIGNATURE		/ MC			DIN		3.8	.98	
12.	Signature, typed or printed na	one of registered agent and OFFICERS AND DIF		TE: Registere	d Agent signature	quired when reinstating)	DATE DES TO OFFICERS A	E AND DIRECTOR	S IN 12
TITLE	Ρ	01110211071112	DELETE	1.1 1/	TLE	ADDITIONO/OFFAIR	JES TO CITIOENS?	Change	Addition
NAME	RAGAN, MICHAE	ELL		1.2 N/	AME				
STREET ADDRESS	-1205 PRIMROSE			1.3 \$1	TREET ADDRESS	1465 E 75	N][
CITY-ST-ZIP	ROSWELL GA-			1.4 01	TY-ST-ZIP	WHREAW DI	V 46580		
TITLE	AS		☐ DELETE	2.1 17	TLE		_	Change	Addition (
NAME	RAGAN, DEANN			2.2 N/					į
STREET ADDRESS	4450 BYRON RE	.			FREET ADDRESS	14 40 6 73	、 Λ		
CITY-ST-ZIP TITLE	_ET_MYERS FC		☐ DELETÉ	2. 4 C 3.1 TI	TY-ST-ZIP	WAKSAW : IN	ye.	Change	Addition
NAME			- 2000	3.2 N					
STREET ADDRESS					REET ADDRESS				
CITY-ST-ZIP				3,4. G	ITY-ST-ZIP				
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NAME				4. 2 N					
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CITY-ST-ZIP TITLE			DELETE	4.4 Cf 5.1 Tf	TY-ST-ZIP			Change	Addition
NAME			- Verent	5.1 N/				ட சங்கு	
STREET ADDRESS					reet address				
CITY-ST-ZIP					TY-ST-ZIP				
TITLE			DELETE	6.1 TI				Change	☐ Addition
NAME				6.2 NA	ME				į
STREET ADDRESS				6.3 ST	REET ADDRESS				
CITY-ST-ZIP				6.4 CF	TY-ST-ZIP				j

61CHY-SI-ZIP

14. I 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:

FILED

Mar 11 1998 8:00am