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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # \$98083

(6)

Principal Place of Business Mailing Address BOX 1848 BOX 1848 BOX 1848								
1151 SW 30 PALM CITY I		1151 SW 30 ST STE						
TALM OIL I	FL 34330	PALM CITY FL 3499	U		3. Date Incorporated or Quality	fied 3a. C	ate of Last R	•
		· · · · · · · · · · · · · · · · · · ·			12/04/1991		05/01/19	95
i. Principal Pl.]	lace of Business	2a. Mailing Address			4. FEI Number			Applied For
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			65-0316325			Not Applicable Additional
] '		27			5. Certificate of Status Desired	q 🛄		Required
City & State	€	City & State			6. Election Campaign Financin		\$5.0	O May Be
l		28			Trust Fund Contribution	L.J	Adde	d to Fees
Zip ·	Country 25	Zip 29	Cour 30	ntry	This corporation has liability Florida Statutes	y for intangible Yes Mo		199.032,
	9. Name and Address of Currer		1301		10. Name and Address of No			
				81 Name		,		
BRAIN,	BETTY RAE		82 Stree		iress (P.O. Box Number is Not Acce	entable)		
	W. RACQUET CLUB DR.				ess (r.o. box number is not acceptable)			
PALM C	CITY FL 34990		1	83				•
			ħ	84 City			. 85 Z	o Code
. Pursuant t	to the provisions of Sections 607.0502 red agent, or both, in the State of Florid	2 and 607.1508, Florida State da. Such change was author	utes, the abov	re-named corpo	pration submits this statement for the	e purpose of	changina ite i	egistered offic
	ith, and accept the obligations of, Sect	cor occe for the cutto	nado by the or				as registered	agent rain
tamiliar wi	im, and accept the obligations or, Sect	iion 607.0505, Florida Statut	es.		• •			
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tamiliar wil	Signature, typed or printed name of registered agent OFFICERS AN	and title if apolicable (kgent signature require	ยวี when reinstating!	DATE		RS IN 12
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SIGNATURE: * Patricia A DUNICHSON PATRICA J. DERRICK ST 120/96 407-283-6/8/