## 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

City & State  City & State  28  Zip  Country  Signature, typic or printed name of registered agent and tite if applicance  Intel  D City & State  City & State  City & State  6. Election Campaign Financing Trust Fund Contribution  Added to Fees  Country  8. This corporation has kability for intangible tax under s 199.032, Florida Statutes  Yes   No  No  Name and Address of New Registered Agent  10. Name and Address of New Registered Agent  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Soction 607.0505, Florida Statutes.  Signature, typics or printed name of registered agent and tite if applicance   INOTE Projectered Agent synature required when renstating)  Date  12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12    Change   Additional Countribution   Change   Additional Countribution   Addit	or able al
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2. Principal Place of Business  2. Mailing Address  2. Mailing Address  2. Mailing Address  3. Mailing Address  4. FEI Number 59-3096582  Not Applied F Sy-3096582  Suite, Apt. #, etc.  2. Suite, Apt. #, etc.  2. City & State  3. Country  2. Election Campaign Financing Trust Fund Contribution  4. FEI Number 59-3096582  S. Certificate of Status Desired Fee Required	able al
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Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.	al
22   27   27   5. Certificate of Status Desired   \$8.75 Addition Fee Required   City & State   Country   Zip   Country   St. This corporation has liability for intangible tax under s 199.032   Florida Statutos   Ves   No   No   Name and Address of Current Registered Agent   Name   PONS, JEFF T.,    Name   RT. 4, BOX 40   PALATKA,FL64   INTERLACHEN FL 32148   Street Address (P.O. Box Number is Not Acceptable)   RT. 4, BOX 40   PALATKA,FL64   INTERLACHEN FL 32148   Street Address (P.O. Box Number is Not Acceptable)   RT. 4, BOX 40   PALATKA,FL64   Statutes   The provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I standard registered agent of the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE   Signature, typed or printed name of registered agent and the if applicative   NOTE Registered Agent separative register when renstating   DATE   NAME   N	
City & State  28  Country  Zip  Country  29  Country  29  30  Country  8. This corporation has kability for intangible tax under s. 199.032, Florida Statutes  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  81  Name  PONS, JEFF T., IN  RT. 4, BOX 40  PALATKA,FL64  INTERLACHEN FL 32148  84  City  FL  85  Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes.  Signature, typed or printed name of registered agent and the if applicable  Signature, typed or printed name of registered agent and the if applicable  12.  OFFICERS AND DIRECTORS  13.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Added to Fees  19.004 S. This corporation has kability for intanging its under s. 199.032, Florida Statutes  19.0032, Florida Statutes  19.004 S. This corporation has kability for intangible tax under s. 199.032, Florida Statutes  19.0032, Florida Statutes  19.004 S. This corporation has kability for intangible tax under s. 199.032, Florida Statutes  19.0032, Florida Statutes  19.0032, Florida Statutes  10. Name and Address of New Registered Agent  None  81  Name  82  Street Address (P.O. Box Number is Not Acceptable)  FL  85  Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I application of the corporation submits this statement for the purpose of changing its registered agent. I application of the corporation submits this statement for the purpose of changing its registered agent. I application of the corporation submits this statement for the purpose of changing its registered agent. I application submits this statement for the purpose of changing its registered agent. I appl	
Zip Country Zip Country 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PONS, JEFF T., III RT. 4, BOX 40 PALATKA,FL64 INTERLACHEN FL 32148 81 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I section of the purpose of printed name of registered agent and title if application. I hereby accept the appointment as registered agent. I section of the purpose agent and title if application. I hereby accept the appointment as registered agent. I section of the purpose of printed name of registered agent and title if application. I hereby accept the appointment as registered agent. I section of the purpose of printed name of registered agent and title if application. I hereby accept the appointment as registered agent. I section of the purpose of printed name of registered agent and title if application. I have a point remains a printed agent and title if application. I have a point remains a point remains and printed agent and title if application. I have a point remains a point remains a point remains and printed agent and title if application. I have a point of the purpose of changing its registered agent. I have a point of the purpose of changing its registered agent. I have a point of directors. I hereby accept the appointment as registered agent. I have a point of the purpose of changing its registered agent. I have a point of the purpose of changing its registered agent. I have a point of the purpose of changing its registered agent. I have a point of the purpose of changing its registered agent. I have a point of the purpose of changing its registered age	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered open, or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I a SIGNATURE  SIGNATURE  Signature, typical or printed name of registered agent and the if applicable.  NOTE Registered Agent signature required when renstating!  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  UNITED  Change Additional Change Change Additional Change	
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I furthe certify that the information indicated no this annual report or supplemental annual report is true and accounts and that the information indicated in the information in the certification of the	on

ental annual report is true and accurate and that my signature shall have the same legal effect as if made under or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name oath; that I am an officer or director of the corporation appears in Block 12 or Block 16 if changed, or op an

SIGNATURE:

AND TYPED OR PRINTED NAME OR SIGNING OFFICER OR DIRECTOR