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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # V04930

(6)

NATION'S PRIDE DISTRIBUTORS, INC.									
Principal Place 502 PRAIRIE MII MULBERRY FL 3	NE ROAD		Mailing Address 502 PRAIRIE MINE ROAD MULBERRY FL 33860-9167			-	HINI OINA O	BII BIBII BIBII	41 1 11 1481
						3. Date Incorporated or Qualified 01/08/1992		ite of Last F 18/1996	Report
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number			pplied For
21	,	26				65-0308431		_ N	ot Applicable
Suite, Apt.	#, etc	Suite Apt. #, etc.	E1			5. Certificate of Status Desired			Additional
22	//A-MILLIA	City & State						equired	
City & State	€'	28				6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
23 Zip	Country	Zip	Cou	untry			····		
24	¬ ••••		···			8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes Yes No			
	9. Name and Address of Curre	nt Registered Agent	· · · · · · · · · · · · · · · · · · ·			10. Name and Address of New Re	gistered	Agent	·
RAYE	BURN, R. DÖNALD			81	Name				
1002 CROCKER LANE				82	Street Addre	ess (P.O. Box Number is Not Acceptate	ole)		MAN
PLAN	IT CITY FL 33566			83					
								_ 	- <u>-</u>
				84	City		FL	85 Zip	Code
SIGNATURE:		,				ed when reinstacing) ADDITIONS/CHANGES TO OFFICE	DAYE DERS AND	DIRECTO	RS IN 12
THLE	PD	☐ DELETE	11T	ITLE				☐ Change	☐ Addition
NAME	R. DONALD RAUBURN		1.2 N	AME					
STREET ADDRESS	1002 CROCKER LANE		138	TREET	ADDRESS				
CITY-ST-2iF	PLANT CITY FL	D COUNTY			T - ZIP			05	T Aure-
TITLE	D LEGATED EDANK			2.1 TITLE 2.2 NAME				Change	Addition
NAME Aroses Loopered	FRAZER, FRANK 51 WINDEYER CRESCENT				+000000				
STREET ADDRESS	KANATA, ONTARIO, CANADA	K2K -2P7	/ 007		ADDRESS ST-ZIP				
CITY-ST-ZIP TITLE	D	DELETE	3.1 T		21.54			Change	Addition
NAME	O'NEAL, PAUL		3.2 ₦	AME					
STREET ADDRESS	447 MARCH ROAD		3.3 S	TREET	ADDRESS				
CITY-ST-ZIP	KANATA, ONTARIO, CANADA		3.4 (CITY-	ST-ZIP				
TITLE		L DELETE	4.1 T	ITLE				Change	☐ Addition
NAME.				NAME					
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP	——————————————————————————————————————	DELETE			T-ZIP			Change	Addition
TITLE NAME		ET DELCH	5.1 T 5.2 N					Print Change	AUGIOUI
STREET ADDRESS					ADDRESS				
CrTY - ST - ZIP					T-ZIP				
TITLE		DELETE	61T					Change	Addition
NAME			62 N	IAME	ļ				
STREET ADDRESS			638	TREET	ADDRESS				
CITY-ST-7IP					ST- ZIP		.,		
informatic Lam an o	on indicated on this annual report or	supplemental annual report is or the receiver or trustee empo	s true and owered to	accı	urate and that	Fin Section 119.07(3)(i), Florida Statute my signature shall have the same leg- t as required by Chapter 607, Florida !	al effect as	s if made ur	nder oath; that