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

PROFIT CORPORATION ANNUAL REPORT

1997

少是自身也多病,心勢不必然也更多必要是更多有致感激人所致,心動人,如此所称,他往其是也不太人,他是一种是这种生活的人,也是一种,



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V11614

(7)

DONALD R. RHODES, CPA, P.A.

FILED
Apr 18 1997 8:00am
Secretary of State



Principal Place of Business 1402 SE 46TH LANE CAPE CORAL FL 33904 US		Mailing Address 1402 SE 46TH LANE CAPE CORAL FL 33904-	1402 SE 46TH LANE CAPE CORAL FL 33904-8628					
					3. Date Incorporated or Qualified 02/03/1992	3a. Date of 04/09/1		leport
	Place of Business	2a. Mailing Address			4. FEI Number			oplied For
21		26			65-0311884 Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	□ \$ ¹		Additional	
22		27					Fee Re	equired
City & State		City & State	Marine Committee Com		6. Election Campaign Financing	\$5.00 May Be		
23		Zip Country			Trust Fund Contribution	Added to Fees		
Zip 24	Country	have any control of the control of t		•	8. This corporation has liability for it			. 199.032,
24	25] 9. Name and Address of Curre	29	30		Florida Statutes 10. Name and Address of New Reg			·
DUO			81	Name	10. 144110 8114 7441000 07 7701	listorou riger		
	DDES, DONALD R. 2 SE 48TH LANE							
	E CORAL FL 33904		82 Street Addre		ress (P.O. Box Number is Not Acceptab	e)		
CAP	E COLAIT LE 22804		B3					
			84	City		FI 85	Zip (Code
44 Durauant	to the provinces of Sections 507.05	00 and 007 1509 Floride De-	luton the short	nomed at	poration submits this statement to the		L	to reviete and
office or r agent. I a SIGNATURE	registered agent, or both, in the Stat am familiar with, and accept the obli	e of Florida. Such change was gations of, Section 607.0505,	s authorized by Florida Statute	the corpora 3.	poration submits this statement for the pi tion's board of directors. I hereby accep	t the appointn	ient as	registered
	Signature, typed or printed name of registered a			n' signature requ	ired when reinstating)	DATE		
12.		ND DIRECTORS	13.	,	ADDITIONS/CHANGES TO OFFIC			
TITLE	PST PURPOS DOLLARD D	☐ DELETÉ	1.1 TITLE			LJ (Change	Addition
NAME	RHODES, DONALD R.		1.2 NAME					
STREET ADDRESS	1401 SE 46TH LN		1.3 STR[8]	ADDRESS				
CITY-ST-ZIP	CAPE CORAL FL		1.4 CHY-5	1 - 2(P				
TALE			2.1 THLE			[_] (Change	Addition
NAME	RHODES, DONALD R.		2.2 NAME					
STREET ADDRESS	1402 SE 46TH LANE		2.3 STREET	ADDRESS				
CITY-\$1-ZIP	CAPE CORAL FL		2. 4 CITY-	ST - ZIP				
TITLE		☐ DELETE	3.1 TITLE		war.	. [](Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 \$1REL1	ADDRESS				
CITY-ST-ZIP			3.4. CITY-	ST-ZIP				
TITLE		DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-5	1-7IP				<u></u>
TITLE		DELETE	5.1 TOLE				Change	Addition
NAME			5.2 NAME	}				
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY - S	1 <u>-</u> 20°				
TITLE		DELFTE	6.1 1/11.5				Change	Addition
NAME			6.2 NAMÉ					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CITY - S					
	by sortify that the information averally	ad with this filing does not an	oldy for the ave		d in Contine 110 07(3Vi) Florida Ctatudas	1 Contlant	:(. 45 . 4	

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:

Phillippond R. Rholes

4/15/97 941-945-2221