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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V13389

(4)

FUTURE FOUNDERS, INC.

Principal Place of Business

Mailing Address

FILED Apr 29 1997 8:00am Secretary of State



NAPLES FL 33964			1011 27TH STREET S.W. NAPLES FL 34117-4231					
						3. Date Incorporated or Qualified 02/05/1992	3a. Date of La 06/25/199	
2. Principal P	lace of Business	2a. Mailing Addre	2a. Mailing Address			4. FEI Number	, 00,20, 1	Applied For
21		26	26			65-0368215		Not Applicable
Suite, Apt. #, etc.			Surte, Apt. #, etc.				S8.7	5 Additional
22		27	27			5, Certificate of Status Desired		e Required
City & State		City & State				6. Election Campaign Financing		
23		28	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Co	Country				
24	25	29	30	30		8. This corporation has liability 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				
HOL	LAND, CRAIG "RED"			81	Name			
1207 THIRD STREET SOUTH								
1 .				82 Street Addi		dress (P.O. Box Number is Not Acceptab	e)	
SUITE 2 NAPLES FL 33940				83				· · · · · · · · · · · · · · · · · · ·
11/4	LEG FL 00940							
				84	Crty		FL 85	Zip Code
44 Pursuant	to the provisions of Continue 607.0	500 and CO7 1500 51min	- Ct-t dea the					
office or r	egistered agent, or both, in the Sta	de of Horida. Such chang	a statutes, the a ge was authoriz-	anove- ed by	-named co the corpor	orporation submits this statement for the pration's board of directors. I hereby accept	urpose of changir t the appointment	ig its registered
agent. I a	m familiar with, and accept the obl	igations of, Section 607.0	0505, Florida St	atutes.	•	, ,	.,	
SIGNATURE								
12.	Signature, typed or printed name of registered to	agent trid 14te d'appacable ND DIRECTORS			t signature req	jured when reinstating)	DATE.	
TITLE	DP OFFICERS A	DEI	13.	TITLE		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	
NAME	COMPTON, JUANA LEE						L_1 Cilan	he Manuou (
		' Ò T		NAME				7
STREET ADDRESS	1011 27 STREET, SOUTHWE	301		STHE (T.A	1			اً أ
CITY-ST-ZIP	NAPLES FL			CHY-SI-	- 717			
TITLE	DV DELETE			2.1 THE			Chan	ge L Addition
NAME	COMPTON, GARY JOSEPH		2.2	2.2 NAME				
STREET ADDRESS	1011 27 STREET, SOUTHWE	ST	2.3	STREET A	DDRESS			
CITY-ST-ZIP	NAPLES FL			CHY-ST	- ZIF			
TITLE	DST	∐ DEI	.ETE 311	11111			☐ Chan	ge 🔲 Addition
NAME	COMPTON, LOUIE JOSEPH		321	NAME				
STREET ADORESS	1011 27 STREET SOUTHWE	ST	333	STREET A	IDDRESS			
CITY-ST-ZIP	NAPLES FL		3.4.	C(11Y - S1	- ZIP			
TITLE		DE1	F.F. 4.1	TITLE			Chan	ge 🔲 Addition
NAME			4. 2	NAME				
STREET ADDRESS			4.3 5	STREET A	DORESS			
CITY-ST-ZIP			4.4.0	CHY-ST-	- 71P			Ì
TITLE		DEL		lijft Siit Si			Chan	ge Addition
NAME				NAME				
STREET ADDRESS				STREET A	DOBESS			
CITY-ST-ZIP				CITY-ST-	- 1			
TITLE		DEC						oe Addition
NAME				NAME			L_J Onan	go [] naution
STREET ADDRESS					DDDICE			
				SIREFT A				
CITY-ST-ZIP			6.4 (CITY-ST-	ZIP			

14. I do 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 logal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted 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.