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 # V14196

(2)

S. Delet incorporated or Qualified Sa. Date of Last Report Q/13/1992 Sa. Detailed Q/13/1992 Q/16/1998 Applied Q/13/1992 Q/16/1998 Applied Q/13/1992 Q/16/1998 Applied Applied Q/16/1998 Appl			Mailing Address 7001 E SAWGRASS RD SARASOTA FL 34240-8655 US						
2. Manipup Address 2a. Malling Address 5. Certificate of Status Desired 56-03 14444	00		33						
Suite. Apt #, etc. Suite. Apt #, etc. Suite. Suite	2. Principal F		<u> </u>	4				Ap	plied For
City & State Country Reflection Company Prinancing Trust Fund Contribution Reflection Refl	aranda and an angel a letter 10.		26 Same 45	abou	<u>e</u>	65-0314444			t Applicable
City & State: City & State: City & State: 28	` ` `	#, etc						•	
28	· · · · · · · · · · · · · · · · · · ·	le			·········	6 Flection Cempaign Financing			
22 Street Address (P.O. Box Number is Not Acceptable) 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name 12. Street Address (P.O. Box Number is Not Acceptable) 13. Name 14. Pursuant to the provisions of Sections 607 0502 and 607 1508. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both in the State of Floridal. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and facute with, and accept the obligations of, Section 607 0505, Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and the provision of the submit of the purpose of changing its registered agent, and the purpose of changing its registered agent, and the purpose of changing its registered agent, and the purpose of changing its registered agent agent and the purpose of changing its registered agent	23		28						
ROBERTS, BRUCE F 7753 STATE RD. 72 SARASOTA FL 34241 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zup Code 85 Zup Code 86 City FL 85 Zup Code 87 Zup Code 88 Zup Code 89 Zup Code 80 Z		Country	Zip	Country	1	8. This corporation has liability for i			199.032,
ROBERTS, BRUCE F 7753 STATE RD. 72 SARASOTA FL 34241 23 Sireet Address (P.O. Box Number is Not Acceptable) 24 City FL 85 City FL 8	24			30	 				
T753 STATE RD. 72 SARASOTA FL 34241 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 reg office 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 registance agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature for each change of registered agent of both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registance required when reinstalling. DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Intel DOCHER, ARTHUR H II JOCHER, ARTHUR H II JOCHER, ARTHUR H II 12 NAME 471 BEARDED OAKS CIRCLE 13 STREET ADDRESS SARASOTA FL 34232 14 CITY-ST-ZIP DELETE 11 TITLE Change CHY-ST-ZIP DELETE 22 NAME SARASOTA FL 34241 DELETE 33 STREET ADDRESS SARASOTA FL 34241 DELETE 34 CITY-ST-ZIP Change		· · · · · · · · · · · · · · · · · · ·	nt Registered Agent	04	Name	10. Name and Address of New Re	pistered Age	int	
SARASOTA FL 34241 83 City FL 85 City St 24 City FL 85 City FL 85 City FL 85 City St 24 City FL 85 City St 24 City FL 85 City St 24 City FL 85 City FL 85 City FL 85 City FL 85 City St 24 City FL 85 City FL 85 City FL 85 City FL 85 City St 24 City FL 85 City FL 85 City FL 85 City St 24 City FL 85 City FL 85 City St 24 City FL 85 City FL 85 City St 24 City FL 85 City FL 85 City St 24 City FL 85 City FL 85 City St 24 City FL 85 City FL 85 City St 24 City FL 85 City St 24 City St 24 City FL 85 City St 24 City FL				01	ivanie	Same			
Basic City FL Basi				82	Street Add	ress (P.O. Box Number is Not Acceptab	le)		Personal Control of Co
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 am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE Signature Signatur	SAN	ASUIA PE 34241		83					
### PTD DELETE 11 TITLE DELETE 13 STREET ADDRESS SARASOTA FL 34222 14 CITY-ST-2IP STAPE SARASOTA FL 34241 DELETE 33 STREET ADDRESS SARASOTA FL 34241 DELETE 31 STREET ADDRESS SARASOTA FL 34241 DELETE STARASOTA FL 34241 DELETE DELETE STARASOTA FL 34241 DELETE STARASOTA FL 34241 DELETE STARASOTA FL 34241 DELETE STARASOTA FL 34241 DELETE DELETE STARASOTA FL 34241 DELETE STARASOTA FL 34241 DELETE STARASOTA FL 34241 DELETE STARASOTA FL 34241 DELETE DELETE STARASOTA FL 34241 DELETE STARASOTA FL 34241 DELETE STARASOTA FL 34241 DELETE DELETE STARASOTA FL 34241 DELETE D									
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, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent with, and accept the obligations of, Section 607 (505, Florida Statutes). SIGNATURE Signature byted or protect name of registered agent agent agent agent agrature required when reinstalling). DATE				84	City		EI ⁶	35 Zip (Code
NAME STREET ADDRESS SARASOTA FL 34232 1.4 CITY-ST-ZIP	SIGNATURE	urn rarmitar with, and accept the oblig	ent and title if applicable (NOTE	Registered Age	S .	red when reinsteling)	DATE		
STREET ADDRESS A71 BEARDED OAKS CIRCLE 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	TITLE	PTD	☐ DELETE	1.1 TITLE					☐ Addition
CHY-SI-ZIP SARASOTA FL 34232	NAME	Jocher, arthur H II		1.2 NAME					
DELETE DELETE DELETE Change DELETE NAME	STREET ADDRESS			1.3 STREET	ADDRESS				
NAME EVANS, SIDNEY M	City St ZiF	· · · · · · · · · · · · · · · · · · ·		1.4 CITY-S	T-21P				
STREET ADDRESS SARASOTA FL 34241 2.9 STREET ADDRESS 2.4 CITY-ST-ZIP		1	[] DELETE	2.1 TITLE				Change	Addition Addition
CHY-ST-ZIP SARASOTA FL 34241 2.4 CITY-ST-ZIP Change CHY-ST-ZIP Change CHY-ST-ZIP Change CHY-ST-ZIP Change CHY-ST-ZIP Change CHY-ST-ZIP CHY-ST-ZIP CHY-ST-ZIP CHY-ST-ZIP CHY-ST-ZIP CHANGE CHY-ST-ZIP CHANGE CHY-ST-ZIP CHANGE CHY-ST-ZIP Change CHY-ST-ZIP CHANGE CHAN	* *								
DELETE DELETE 3.1 TITLE Change				B		•			
NAME 32 NAME 32 NAME		SAMSOTA FL 34241	TT DELETE		ST-ZIP			Channa	Addition
STREET ADDRESS 3.3 STREET ADDRESS			_ otten				L	Crange	□] A00⊞0R
CTY-ST-ZIP 34. CITY-ST-ZIP					ADDRESS				
TITLE DELETE 4.1 TITLE Change					- 4				
STREET ADDRESS 4.3 STREET ADDRESS C(TY - S1 - ZIP 4.4 C(TY - S1 - ZIP) TITLE □ DELETE 5.1 TITLE □ Change			DELETE					Change	Addition
CiTy - S1 - ZIP 4.4 CiTy - ST - ZIP TITLE DELETE S.1 TITLE Change	NAVE			4 2 NAME				•	
TITLE DELETE 5.1 TITLE Change	STREET ADDRESS			4.3 STREET	address				
	C(TY+S1+Z(P			4.4 CITY-S	T-ZIP				
NAME I TANAMAN TO THE PARTY OF	TITLE		☐ DELETE	5.1 TITLE				Change	Addition
3.2 NAME	NAME			5.2 NAME					
STREET ADDRESS 5.3 STREET ADDRESS	1			5.3 STREET	address				
CITY-ST-ZIP			□ nt etc		T-ZIP			Observe	A della -
					Ì		لبيا	CHANGE	Addition
					ADDRESS				
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 legal effect as if made under or	14. I do heret	I	d with this filing does not qualify	for the exer	mntion stated	in Section 119.07(3)(i). Florida Statutes	. I further cer	rlify that t	he

PH- 377-3928

FILED

May 01 1997 8:00am

Secretary of State