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

DOCUMENT # • V57253

1. Corporation Name

(9)

PROF	ESSIONAL BUSINESS BE	Mailing Address				
3270 SUNTREE BLVD SUITE 201 MELBOURNE FL 32940		3270 SUNTREE BLVI SUITE 201	3270 SUNTREE BLVD SUITE 201 MELBOURNE FL 32940			
MELBOURN	E FL 32940	METROONNE LE 259	40		 Date incorporated or Qualified 08/13/1992 	3a. Date of Last Report 07/07/1995
2. Principal Pia	ce of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3148448	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27				Fee Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		This corporation has liability for	
24	25	29	30			s No
	g. Name and Address of Curr		1		10. Name and Address of New	Registered Agent
			81	Name		
STIVE	RS, JOHN		82	Street A	Address (P.O. Box Number is Not Accepta	able)
3270 SUNTREE BLVD						
MELBO	OURNE FL 32940		83			
			84	City		85 Zip Code
11 Pursuant t	o the provisions of Sections 607.05	i02 and 607 1508. Florida Statuti	es, the above-r	named co	rporation submits this statement for the p	urpose of changing its registered office
or register	ed agent, or both, in the State of Flo h, and accept the obligations of Se	orida. Such change was authoriz action 607.0505, Florida Statutes	ed by the corp	oration's	rporation submits this statement for the p board of directors. I hereby accept the ap	pointment as registered agent. Nam
SIGNATURE .						
	Signature, typed or printed name of registered as			ni signature n	equired when reinstating!	DATE FFIÇERS AND DIRECTORS IN 12
12.	OFFICERS A	AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OF	
TITLE NAME	STIVERS, JOHN S.		1. 1 1114			Change Maddition
STREET ADORESS	3270 SUNTREE BLVD		1.2 NAME			☐ Change Addition
CITY-S1-ZIP			1.2 NAME	T ADDRESS	Suite 201	Change by Addition
			1 3 STRFET	T ADDRESS ;	Suite 201	∐ Change Þ≰ Add∙tion
	MELBOURNE FL	DELETE		SF-ZIP	Suite 201	☐ Change ☐ Addition ☐ Change ☐ Addition
THLE	MELBOURNE FL D	☐ DEFELE	1.3 STRFET	SF-ZIP	Suite 201	
TYTLE NAME	MELBOURNE FL D WEBSTER, JEFFREY W.		1 3 STRFET 1 4 CHY-S 2 1 TITLE 2 2 NAME	SF-ZIP		☐ Change ☐ Addition
NAME STREET ADDRESS	MELBOURNE FL D		1 3 STRFET 1 4 CHY-S 2 1 TITLE 2 2 NAME	SF-ZIP FADORESS		☐ Change ☐ Addition
TYTLE NAME	MELBOURNE FL D WEBSTER, JEFFREY W. 3270 SUNTREE BLVD, S		1 3 STREET 1 4 GFY-5 2 1 TITLE 2 2 NAME 2.3 STREE	SF-ZIP FADORESS	8000017 	☐ Change ☐ Addition
NAME STREET ADDRESS GITY - ST - ZIP	MELBOURNE FL D WEBSTER, JEFFREY W. 3270 SUNTREE BLVD, S	UITE 201	13 STREET 14 CHY-S 2 1 TITLE 22 NAME 2.3 STREE 2.4 CHY-S	SF-ZIP FADORESS		☐ Change ☐ Addition
THE NAME STREET ADDRESS GHY-ST-ZIP THE	MELBOURNE FL D WEBSTER, JEFFREY W. 3270 SUNTREE BLVD, S	UITE 201	13 STRFET 14 CFY-5 2 1 TITLE 22 NAME 23 STREE 24 CHY-5 3.1 TITLE 32 NAME	SF-ZIP FADORESS	8000017 	☐ Change ☐ Addition
TYLE NAME STREET ADDRESS GITY - ST - ZIP TYTLE NAME	MELBOURNE FL D WEBSTER, JEFFREY W. 3270 SUNTREE BLVD, S	UITE 201	13 STRFET 14 CFY-5 2 1 TITLE 22 NAME 23 STREE 24 CHY-5 3.1 TITLE 32 NAME	ST-ZIP FADORESS ST-ZIP FADORESS	8000017 	Change Addition Change Addition Change Addition
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THE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS C-TY-ST-ZIP	MELBOURNE FL D WEBSTER, JEFFREY W. 3270 SUNTREE BLVD, S	UITE 201	13 STRFET 14 CFY-S 2 1 TITLE 22 NAME 23 STREE 24 CHY-S 3.1 TITLE 32 NAMF 33 STREE 34 CHY-S	ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	8000017 	Change Addition Change Addition Change Addition
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14. Ido 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 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 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 13 if change from an attachment with an address.

NAME OF SIGNING OFFICER OR DIRECTOR

6.3 STREET ADDRESS

6 4 CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS

CR2E034 (12/95)