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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business 22 MAMI AVENUE WEST VENICE FL 34288 23 Mode Mod	DUTTE	NOUP COTTAGE, INC.					
Principal Place of Business	Principal Place of Business		Mailing Address			T (BBT) Exiliti dilita idilita idilita ilden tilit dilati galtı didili bidis gatı gadı gadı gadı i eddi.	
2. Principal Place of Business 2a Mailing Address 4. FEI Number Applied For 28 26 Suite, Apt. 4, etc. 26 Suite, Apt. 4, etc. 29 27 20 Suite Cay & State 20 Cay & State Cay & State 20 Cay & State Cay & State 21 29 Country 29 Solor 22 29 Solor Cay & State 23 Cay & State Cay & State 24 29 Country 29 Solor 25 Chertificate of Status Desired Section Campaign Financing Section Added to Fees 26 Trust Fund Contribution Added to Fees 270 Country 29 Solor 28 Trust Fund Contribution Section Campaign Financing Added to Fees 29 Country 29 Solor 29 Solor Chertificate of Status Desired Section Campaign Financing Added to Fees 20 Chertificate of State Cay & State 21 Chertificate of State Cay & State 22 Country 29 Solor 24 Chertificate of State Cay & State 25 Chertificate of State Cay & State 26 Chertificate of State Cay & State 27 Country 29 Solor 28 Chertificate of State Cay & State 29 Country 29 Solor 20 Chertificate of State Cay & State 20 Chertificate of State Cay & State 20 Chertificate of State Cay & State 21 Chertificate of State Cay & State 22 Street Address (P.O. Box Number is Not Acceptable) 24 Chertificate of State Cay & State 25 Street Address (P.O. Box Number is Not Acceptable) 25 Street Address (P.O. Box Number is Not Acceptable) 26 Chertificate of Repaired Agent 26 Chertificate of Repaired Agent composition of directors. I hereby accept the appointment as registered agent 26 Chertificate of Pees Cay & State 26 Chertificate of Repaired Agent sentence 27 Chertificate Cay & State 28 Chertificate of Repaired Agent sentence 29 Chertificate of Repaired Agent sentence 20 Chertificate Cay & State 20 Chertificate Cay & State 21 Chertificate Cay & State 22 Chertificate Cay & State 23 Chertificate Cay & State 24 Chertificate Cay & State 25			The state of the s			DO NOT WRITE IN THIS SPACE	
2. Principal Place of Business 2. Mailing Address 4. FEN humber Applied for 50-3158165 Not Applicable 50-3158165						3. Date Incorporated or Qualified	
Solite, Apt. #, etc. 20						08/17/1992	
Suite, Apl. #, etc. Suite, Apl. #, etc. Suite, Apl. #, etc. Scrifficate of Status Desired S\$.75 Additional Fee Required City & Status City & City & Status City & City & Status City & Ci	2. Principal P	iace of Business	2a. Mailing Address			4. FEI Number Applied For	
City & State Country 29 Country 20 Country 29 Country 29 Country 29 Country 29 Country 20		· · <u>-5-</u> .					
City & State 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20			Suite, Apt. #, etc.				
Zap						real control of the c	
Country Zip 20 30 Country Zip Country Zip 20 30 Country Registered Agent Personal Property Tax due June 30. Cyfes No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Addr	<u> </u>		├				
28				4 · 4 · · · · · · · · · · · · · · · · ·			
10. Name and Address of Oursett Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address 1		·	├- ┐ '	—			
CHEVALIER, MARY O 227 MIAMI AVENUE WEST VENICE FL 34285 **B4 **City** **FL** **Sire Address** **FC** **FC** **Sire Address** **FC** **Address** **ADDITIONS/CHANGES** **D VICLAS** **D VICLA	24						
THE OHEVALIER, MARY O TREET ADDRESS OTH ST. 2P B2 Street Address (P.O. Box Number is Not Acceptable) B3 Street Address (P.O. Box Number is Not Acceptable) B4 City FL 85 Zip Code City FL 85 Zip Code B4 City FL 85 Zip Code B4 City FL 85 Zip Code Changing its registered 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 registered 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 registered office or registered agent and addition of Florida Statutes. SIGNATURE Signature bytect or pretend agent a final fall of appointment agent and title appointment as registered by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent and addition's appointment as registered by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the Statutes and addition of Florida Statutes. The propriet of the purpose of changing is registered office or registered agent, or both, in the Statutes and addition of Florida Statutes. The purpose of changing is registered agent and addition of Florida Statutes. The purpose of changing is registered agent and addition of Florida Statutes. The purpose of changing is registered agent and addition of Florida Statutes. The purpose of changing is registered agent and addition of Florida Statutes. The purpose of changing is registered agent and addition of Florida Statutes. The purpose of changing is registered agent and addition of Florida Statutes. The purpose of changing is registered agent and addition of Florida Statutes. The purpose of changing is registered agent and addition of Florida Statutes. The purpose of chan			in riegistorea Agent	81	Name	10, Name and Pasiton of New York Ton Ton Ton	
VENICE FL 34285 83							
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature by-ed or pretend named registeries in pretend named registeries in the obligations of, Section 607.0505, Florida Statutes. SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE O CHEVALIER, MARY O DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE O CHEVALIER, MARY O DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE O INTECTOR - PICES Urchange Addition WAME O CHEVALIER, MARY O DIRECTORS 13. STREET ADDRESS 13. STREET ADDRESS 14. Cotty. ST-2P Venice FL 34.28.5 TITLE VPD DELETE 14. Cotty. ST-2P Venice FL 34.28.5 TITLE O INTECTOR - VICE PICES Urchange Addition CHEVALIER, CHERI CHEVALIER, CHERI 11. Cotty. ST-2P Venice FL 34.28.5 TITLE D INTECTOR - VICE PICES Urchange Addition CHEVALIER, CHERI CHEVALIER, CHERI CHEVALIER, CHERI TITLE D INTECTOR - VICE PICES Urchange Addition CHEVALIER, CHERI CHEVALIER CHEVALIER CHEVALIER CHEVALIER CHEVALIER TITLE D INTECTOR - VICE PICES Urchange Addition CHEVALIER CHEVALIER CHEVALIER CHEVALIER CHEVALIER CHEVALIER TITLE D INTECTOR - VICE PICES Urchange Addition CHEVALIER CHEVALIER CHEVALIER CHEVALIER CHEVALIER CHEVALIER CHEVALIER CHEVALIER CHEVALIER TITLE D INTECTOR - VICE PICES Urchange Addition TITLE D INTECTOR - VICE PICES Change A				82	Street /	Address (P.O. Box Number is Not Acceptable)	
State Addition Stat	VE:	NICE FL 34285		83			
11. Pursuant to the provisions of Soctions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submite 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 SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 11. TITLE OFFICERS AND DIRECTORS 12. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 14. OFFICERS AND DIRECTORS 15. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 15. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 16. OFFICERS AND DIRECTORS 17. STARET ADDRESS 18. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 10. CHEVALUER, MARY O 12. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 12. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 14. CHEVALUER, MARY O 15. STREET ADDRESS 16. CHEVALUER, MARY O 15. STREET ADDRESS 16. CHEVALUER, MARY O 16. STREET ADDRESS 17. ST. 2IP 18. CHEVALUER, MARY O 18. CHEVALUER, MARY O 19. STREET ADDRESS 19. O TO T					l		
office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statetuce Signature SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE OCHEVALIER, MARY O CHEVALIER, MARY O STREET ADDRESS CITY-ST-ZIP VENICE FL TITLE OCHEVALIER, CHERI 2713 HERITAGE LANE N. 1150 ROSEDACE STREET ADDRESS CITY-ST-ZIP CHEVALIER, CHERI 2713 HERITAGE LANE N. 1150 ROSEDACE STREET ADDRESS CITY-ST-ZIP CHEVALIER, CHERI 2713 HERITAGE LANE N. 1150 ROSEDACE STREET ADDRESS CITY-ST-ZIP CHAUSSEN, STEPHANIE STREET ADDRESS CITY-ST-ZIP CHAUSSEN CHA				84	City	FL 85 Zip Code	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE OCHEVALIER, MARY O STREET ADDRESS OTY-ST-ZIP TITLE OCHEVALIER CARR, CHERI STREET ADDRESS OTY-ST-ZIP OCHEVALIER CARR, CHERI STREET ADDRESS OTY-ST-ZIP TITLE OCHEVALIER CARR, CHERI 22 STREET ADDRESS OTY-ST-ZIP OCHEVALIER CARR, CHERI 23 STREET ADDRESS OTY-ST-ZIP OCHEVALIER CHERI 24 STREET ADDRESS OTY-ST-ZIP OCHEVALIER CHERI 25 SEC/TREA/D OCHEVALIER CHERI 26 STREET ADDRESS OTY-ST-ZIP OCHEVALIER CHERI 27 STREET ADDRESS OTY-ST-ZIP OCHEVALIER CHERI 24 STREET ADDRESS OTTY-ST-ZIP OCHEVALIER CHERI 15 DELETE OCHEVAL	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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE						
TITLE NAME CHEVALIER, MARY O STREET ADDRESS CITY-ST-ZIP VENICE FL TITLE VPD CHEVALIER-CARR, CHERI STREET ADDRESS CITY-ST-ZIP TITLE DELETE 1.1 TITLE CHEVALIER, MARY O 1.3 STREET ADDRESS CITY-ST-ZIP TO CHEVALIER-CARR, CHERI STREET ADDRESS CITY-ST-ZIP THE CLAUSSEN, STEPHANIE STREET ADDRESS CITY-ST-ZIP TITLE DELETE DELETE 1.1 TITLE CHEVALIER, MARY O 1.3 STREET ADDRESS CHEVALIER, MARY O 1.3 STREET ADDRESS CITY-ST-ZIP TO CLAUSSEN, STEPHANIE STREET ADDRESS CITY-ST-ZIP TITLE DELETE DELETE 1.1 TITLE CHEVALIER, MARY O 1.3 STREET ADDRESS CHEVALIER, CHERI CHEVALIER, CHERI P.O. 30X 731 = 1150 ROSC DALE RA CHEVALIER, CHERI P.O. 30X 731 = 1150 ROSC DALE RA CHEVALIER, CHERI P.O. 30X 731 = 1150 ROSC DALE RA STREET ADDRESS CITY-ST-ZIP TITLE DELETE 1.1 TITLE DELETE 1.1 TITLE DELETE 1.1 TITLE DELETE 1.1 TITLE DELETE 1.1 TITLE DELETE 1.1 TITLE DELETE 1.1 TITLE DELETE DIRECTOR - PRES CHEVALIER, MARY O 1.3 STREET ADDRESS CHEVALIER, MARY O 1.4 CHEVALIER, CHERI P.O. 30X 731 = 1150 ROSC DALE RA CHEVALIER, MARY O 1.4 CHEVALIER, MARY O 1.4 CHEVALIER, MARY O 1.4 CHEVALIER, MARY O 1.5 TREET ADDRESS CHEV-ST-ZIP CHARGE Addition Addition Addition Addition Addition CHEVALIER, MARY O 1.4 CHEVALIER, MARY O 1.5 TREET ADDRESS CHEVALIER, MARY O 2.4 CHEVALIER, MARY O 3.1 TITLE CHEVALIER C	10				enlangia Ins		
NAME STREET ADDRESS CITY-ST-ZIP VENICE FL TITLE VPD CHEVALIER-CARR, CHERI STREET ADDRESS CITY-ST-ZIP BARDENTON FL VENICE CLAUSSEN, STEPHANIE STREET ADDRESS CITY-ST-ZIP NAME CLAUSSEN, STEPHANIE STREET ADDRESS CITY-ST-ZIP UNGBOAT KEY FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE DELETE 1.2 NAME 1.3 STREET ADDRESS CITY-ST-ZIP CLAUSSEN, STEPHANIE STREET ADDRESS CITY-ST-ZIP UNGBOAT KEY FL DELETE D					1		
CITY-ST-ZIP VENICE FL ITTLE VPD CHEVALIER-CARR, CHERI STREET ADDRESS DITY-ST-ZIP DELETE 1.4 CITY-ST-ZIP VENICE 7L 34285 DIRECTOR - VICE PRES LYChange Addition CHEVALIER, CHERI CHEVALIER CH		— · 1 · 1 · ·				CHEVALIER MARY O	
CITY-ST-ZIP VENICE FL ITTLE VPD CHEVALIER-CARR, CHERI STREET ADDRESS DITY-ST-ZIP DELETE 1.4 CITY-ST-ZIP VENICE 7L 34285 DIRECTOR - VICE PRES LYChange Addition CHEVALIER, CHERI CHEVALIER CH					T ADDRCCC	- 500 VILLAS PRIVE	
TITLE NAME CHEVALIER-CARR, CHERI STREET ADDRESS CITY-ST-ZIP BARDENTON FL Venice PL34293 2.4 CITY-ST-ZIP TITLE DELETE 3.0 SEDALE 2.1 TITLE CHEVALIER, CHERI CHEVALIER CHEVAL	•				OT 740	Venice 71 34785	
NAME STREET ADDRESS OTTY-ST-ZIP DELETE CHEVALIER, CHERI P.O. BOX 731 = 1150 ROSE DALE Rd 23 STREET ADDRESS P.O. BOX 731 = 1150 ROSE DALE Rd 23 STREET ADDRESS P.O. BOX 731 = 1150 ROSE DALE Rd 23 STREET ADDRESS P.O. BOX 731 = 1150 ROSE DALE Rd 23 STREET ADDRESS P.O. BOX 731 = 1150 ROSE DALE Rd 23 STREET ADDRESS P.O. BOX 731 = 1150 ROSE DALE Rd 24 STREET ADDRESS P.O. BOX 731 = 1150 ROSE DALE Rd 24 STREET ADDRESS P.O. BOX 731 = 1150 ROSE DALE Rd 24 STREET ADDRESS P.O. BOX 731 = 1150 ROSE DALE Rd 24 STREET ADDRESS P.O. BOX 731 = 1150 ROSE DALE Rd 24 STREET ADDRESS P.O. BOX 731 = 1150 ROSE DALE Rd 24 STREET ADDRESS P.O. BOX 731 = 1150 ROSE DALE Rd 24 STREET ADDRESS P.O. BOX 731 = 1150 ROSE DALE Rd 24 STREET ADDRESS P.O. BOX 731 = 1150 ROSE DALE Rd 25 STREET ADDRESS P.O. BOX 731 = 1150 ROSE DALE Rd 24 STREET ADDRESS P.O. BOX 731 = 1150 ROSE DALE Rd 25 STREET ADDRESS P.O. BOX 731 = 1150 ROSE DALE Rd P.O. BOX 731 = 11			<u></u>		SI-ZIP	Diffecto P = VICE PRES Thanne Daddition	
BARDENTON FL Venice PL 34293 2.4 CITY-ST-ZIP Venice 76 34284-Venice FL 34293 TITLE D DELETE 3.1 TITLE Sec/TREA/D DELETE 3.2 NAME CLAUSSEN, STEPHANIE STREET ADDRESS CITY-ST-ZIP LONGBOAT KEY FL TITLE DELETE 4.1 TITLE DELETE 4.1 TITLE Addition 4.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.1 TITLE DELETE 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE		_				CHEVALLE CHERY	
BARDENTON FL Venice PL 34293 2.4 CITY-ST-ZIP Venice 76 34284-Venice FL 34293 TITLE D DELETE 3.1 TITLE Sec/TREA/D DELETE 3.2 NAME CLAUSSEN, STEPHANIE STREET ADDRESS CITY-ST-ZIP LONGBOAT KEY FL TITLE DELETE 4.1 TITLE DELETE 4.1 TITLE Addition 4.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.1 TITLE DELETE 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE				A STORE	T ADADCOĆ	P.O. BOX 731 - 1150 ROSEDALE KOL	
TITLE D DELETE 3.1 TITLE SEC/TREA/D Defiange Addition NAME CLAUSSEN, STEPHANIE STREET ADDRESS CITY-ST-ZIP TITLE DELETE DELETE DELETE 3.1 TITLE SEC/TREA/D CLAUSSEN, STEPHAU)E 3.2 NAME CLAUSSEN, STEPHAU)E 3.3 STREET ADDRESS CITY-ST-ZIP LONGBOAT KEY FL 3.4 CITY-ST-ZIP LONGBOAT KEY FL JELETE 4.1 TITLE LONGBOAT KEY FL Addition Addition LONGBOAT KEY FL Change Addition Addition CLAUSSEN, STEPHAU)E 3.2 NAME 4.1 TITLE LONGBOAT KEY FL Change Addition Addition Addition CLAUSSEN, STEPHAU)E 3.2 NAME 4.1 TITLE CLAUSSEN, STEPHAU)E 3.2 NAME 4.1 TITLE CHANGE Addition Addition Addition CLAUSSEN, STEPHAU)E 3.2 NAME 4.1 TITLE CHANGE Addition Addition Addition					, nooneoo		
NAME STREET ADDRESS CITY-ST-ZIP TITLE CLAUSSEN, STEPHANIE 3.2 NAME 3.3 STREET ADDRESS 4.1 CEDAR STREET 4.1 IIILE 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE CLAUSSEN, STEPHAUTE 3.2 NAME 4.1 LOCADAY 4.1 LOCADAY 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE CLAUSSEN, STEPHAUTE 4.1 LOCADAY 4.2 LOCADAY 4.2 LOCADAY 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE CLAUSSEN, STEPHAUTE 4.1 LOCADAY 4.2 LOCADAY 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP TITLE CLAUSSEN, STEPHAUTE 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP TITLE CLAUSSEN, STEPHAUTE 4.1 LOCADAY 4.1 LOCADAY 4.2 LOCADAY 4.4 CITY-ST-ZIP TITLE CLAUSSEN, STEPHAUTE 4.3 STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP TITLE CLAUSSEN, STEPHAUTE 4.1 LOCADAY 4.1 LOCADAY 4.2 LOCADAY 4.2 LOCADAY 4.3 STREET ADDRESS 4.3 STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP TITLE CLAUSSEN, STEPHAUTE 4.1 LOCADAY 4.2 LOCADAY 4.4 CITY-ST-ZIP TITLE CLAUSSEN, STEPHAUTE 4.1 LOCADAY 4.2 LOCADAY 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP TITLE CLAUSSEN, STEPHAUTE 4.1 LOCADAY 4.4 CITY-ST-ZIP TITLE CLAUSSEN, STEPHAUTE 4.1 LOCADAY 4.2 LOCADAY 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP TITLE CLAUSSEN, STEPHAUTE 4.1 LOCADAY 5.4 LOCADAY 5.			NFL VENILE PLANTS 2.		S1-ZIP	Sec / TREALD Venance Addition	
STREET ADDRESS CITY-ST-ZIP TITLE \$3.9 STREET ADDRESS CITY-ST-ZIP \$3.0 CITY-ST-ZIP \$4.1 TITLE \$4.2 NAME \$4.2 NAME \$4.3 STREET ADDRESS \$4.4 CITY-ST-ZIP \$5.1 TITLE \$5.1 TITLE \$3.0 STREET ADDRESS \$4.1 Cod ar \$4.2 CITY-ST-ZIP Change Addition		_					
CITY-ST-ZIP						LI Codar St	
TITLE DELETE 41 TiTLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 51 TITLE	1						
NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE □ DELETE 5.1 TITLE □ Change □ Addition		LONGBOAT NET TE	DELETE		31-ZIF		
STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition			time Visit is			<u> </u>	
CITY-ST-ZIP 4.4 EITY-ST-ZIP TITLE DELETÉ 5.1 TITLE						•	
TITLE DELETE 5.1 TITLE Change Addition							
			DELETE		91 - £#F	Change Addition	
NAME 5.2 NAME				5.2 NAME		paint a configuration of the c	
STREET ADDRESS 5.3 STREET ADDRESS					T ANNERSS		
CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 VITLE Change Addition			DELFTE		31-£IF	Change Addition	
NAME 62 NAME							
STREET ADDRESS 63 STREET ADDRESS							
CITY-ST-ZIP 64 CITY-ST-ZIP							

14. I 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 oath; that I am an officer or director of the corporation or the roceiver 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.

STEPHANIE MARICCEA)

FILED

May 19 1998 8:00am

Secretary of State