## 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 # V72063** (3) DESIGN TEAM WEST, INC. Principal Place of Business Mailing Address 1227 9TH AVENUE WEST 1227 9TH AVENUE WEST BRADENTON FL 34205-7301 **BRADENTON FL 34205** 3. Date Incorporated or Qualified 3a. Date of Last Report 10/13/1992 03/07/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0375192 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 Country Zφ Country Zip This corporation has liability for intangible tax under s. 199.032, 30 Florida Statutes Yes No 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent MICHAEL 81 Name CARTER (MICAHEL) M. 1227 9TH AVENUE WEST 82 Street Address (P.O. Box Number is Not Acceptable) BRADENTON FL 34205 83 84 City 85 Zip Code 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 office or registered agent on both, if he 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, included accept the obligations of Section 607.0505, Florida Statutes. 3-10-11 SIGNATURE (NOTE: Registered Agent signature required when reinstating) FICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) (6) 12 13. DELETE 1.1 TIFLE Change Addition TITLE HITCHCOCK, ROBERT E NAME 1.2 NAME 2E034 1227 9TH AVENUE WEST STREET ADORESS 1.3 STREET ADDRESS **BRADENTON FL 34205** 1.4 CITY-ST-7IP City-St-ZiP THLE DELETE 2.1 TITLE Change Addition CARTER, MICHAEL M NAME 2.2 NAME 1227 9TH AVE. WEST STREET ADDRESS 2.3 STREET ADDRESS **BRADENTON FL 34205** CHY-\$1-20-2. 4 CITY - ST-ZIP DELETE Change Addition TATLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS CHY-ST-20 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE THUE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADORESS CH1Y - 51-2IF 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Addition THE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY: \$1:Z0 THILE ☐ DELETE 6.1 YITLE Change Addition 6.2 NAME NAME

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), Fiorida 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 12 or Block 13 if changed or in an address.

6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CHY-ST-769

AND TYPED OR PRINTED MAD OF STONING OFFINER OR DIRECTOR

3-10-41

(941) 745-1700

FILED

Mar 13 1997 8:00am

Secretary of State