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

FILED Apr 21 1997 8:00am Secretary of State

DOCUI 1. Corporatio GARRIO	MENT # V72133 IT, INC.	(4)					# 6 10#118#
Principal Place of Business Mailing Address				···· <u>· </u>		IION KIBIL ONDN BION ON	1() () () ()
1919 BAYWOOD SARASOTA FL	1919 BAYWOOD DR. SARASOTA FL 34231-4716						
					3. Date Incorporated or Qualified 10/16/1992	3a. Date of Las 04/05/1996	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0366959	Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		5 Additional Required
City & Stat	e	City & State			6. Election Campaign Financing		
23		28		Trust Fund Contribution		00 May Be ed to Fees	
Zip	Country Zip		Countr	y	8. This corporation has liability for i		
24	25 29 30		30			Yes 🞾 No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent	
	RIOTT, WILLIAM R.		81	Name			
8315 BRANDIES CIR., W			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)	
SARASOTA FL 34243			83				
			100	<u>'</u>			
			84	City		FL 85 Z	ip Code
11. Pursuani	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	les, the abov	re-named corr	poration submits this statement for the p	urpose of changing	g its registered
office or r	registered agent, or both, in the State of am familiar with, and accept the obligat	of Florida, Such change was tions of Section 607,0505. Fi	authorized b orida Statute	y the corpora	poration submits this statement for the p lion's board of directors. I hereby accep	of the appointment	as registered
SIGNATURE							
	Signature, lyped or printed name of registered agent			gent signature requi	red when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS DELETE		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	
NAME	GARRIOTT, WILLIAM R.		1.2 NAME			. Crising	, <u> </u>
STREET ADDRESS	8315 BRANDIES CIR. W.		1.3 STREET ADDRESS				8
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP				٤
TITLE			2.1 TITLE			☐ Chang	e Addition C
NAME			2.2 NAME				İ
STREET ADDRESS	8315 BRANDIES CIR. W.		2.3 STREE	T ADDRESS			
CITY-ST-ZIP	SARASOTA FL		2 4 CHY	- S1 - ZIP			
TITLE	☐ DELETE : 3		31 TITLE			☐ Chang	e [_] Addition
NAME			3.2 NAME	ì			}
STREET ADDRESS				1 ADDRESS			
CITY-ST-ZIP TITLE			3.4. CITY- 4.1 TITLE	· S1 - ZIP		Chang	e Addition
NAME		_ vicen	4 2 NAMI			onang	5 Li Accident
STREET ADDRESS				T ADDRESS			l
CITY-ST-ZIP			4.4 CiTY -				
TITLE			5.1 TITLE	V. E.,		☐ Chang	e Addition
NAME			5.2 NAME				
STREET ADDRESS			5 3 STREE	T ADDRESS			
ÇITY-ST-ZIP			5.4 CITY-	S1 - 7IP			
TITLE		DELETE 6.1 TI			·· -	☐ Chang	e Addition
- NAME			6.2 NAME				ļ
STREET ADDRESS	:			T ADDRESS			Ì
CITY-ST-ZIP	by partify that the information assembled	with this filing sleep not a U	6.4 CHY-		d in Section 119.07(3)(i), Florida Statutes	. I further could the	ot the
IN I UU NOTOI	by coning marine information supplied	with this mind odes not drail	ry for the ex	empron stated	a in acciron in is.o/(a)(i), monda Statutes	s. Fruerier certify th	at tite

4. 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 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 on an attachment with an address.

CIGNATURE, LA SICE OR I MALL COM

4/14/00

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