


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

FILED

Jul 01 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # V74182 (9)**  
1. Corporation Name  
**INDEPENDENCE INDUSTRIES, INC.**



Principal Place of Business <b>20493 MIDWAY BLVD PORT CHARLOTTE FL 33952 US</b>	Mailing Address <b>PO BOX 380368 MURDOCK FL 33938-0368 US</b>
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>10/26/1992</b>		3a. Date of Last Report <b>06/27/1996</b>	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number <b>65-0377527</b>		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>FLECKEN, WILLIAM J 20493 MIDWAY BLVD PORT CHARLOTTE FL 33952</b>				B1 Name			
				B2 Street Address (P.O. Box Number is Not Acceptable)			
				B3			
				B4 City			
				FL B5 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, 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 \_\_\_\_\_ (NOTE: Registered Agent's signature required when resigning) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE	1.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FLECKEN, WILLIAM J		1.2 NAME				
STREET ADDRESS	20493 MIDWAY BLVD		1.3 STREET ADDRESS				
CITY-ST-ZIP	PORT CHARLOTTE FL		1.4 CITY-ST-ZIP				
TITLE	P	<input type="checkbox"/> DELETE	2.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	METZ, TARA J.		2.2 NAME				
STREET ADDRESS	8407 CERRO CIRCLE - 212		2.3 STREET ADDRESS				
CITY-ST-ZIP	TAMPA FL		2.4 CITY-ST-ZIP				
TITLE	S	<input type="checkbox"/> DELETE	3.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FLECKEN, KATHLEEN M.		3.2 NAME				
STREET ADDRESS	20493 MIDWAY BLVD		3.3 STREET ADDRESS				
CITY-ST-ZIP	PORT CHARLOTTE FL		3.4 CITY-ST-ZIP				
TITLE	T	<input type="checkbox"/> DELETE	4.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	METZ, DARREN J.		4.2 NAME				
STREET ADDRESS	2000 SW 16ST APT 1		4.3 STREET ADDRESS				
CITY-ST-ZIP	GAINESVILLE FL		4.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

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 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.

CR2E034 (9/96)