## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION **ANNUAL REPORT** 

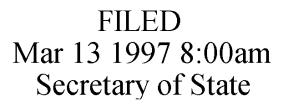


FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1997 DOCUMENT # N00331



FLORIDA						
Principal Place of Business Mailing Address  139-145 FIRST AVE DAYTONA BEACH FL 32114-0201  DAYTONA BEACH FL 32114-0201						T (DOUGHER BUT DOUGH FILED THE BURL DIGHT DIGHT BURL DIGHT DIGHT BURL DIGHT B
				-3201		
						3. Date incorporated or Qualified 3a. Date of Last Report 02/20/1996
2. Principal Place of Business       2a. Mailing Address         21       26         Suite, Apt. #, etc.       Suite, Apt. #, etc.         22       27		ddress			4. FEI Number Applied For S9-1907993 Not Applicable	
					5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State City & S 23 28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip		Country		8. This corporation has liability for intangible tax under s. 199.032,
24	25 Name and Address of Curr	29	ınt .	[30]	<del></del> ,	Fiorida Statutes Yes No
	9. Name and Address of Curr	eut Hedistelea Ade	<u>'nt</u>	81	Name	10. Name and Address of New Registered Agent
	DOANLD G DLONIAL DR			82		Address (P.O. Box Number is Not Acceptable)
DAYTONA BEACH FL 32117			83			
				84	City	FL 85 Zip Code
11. Pursuant office or r	to the provisions of Sections 617.05 egistered agent, or both, in the Sta	502 and 617,1508, Fi te of Florida, Such o	lorida Statu hange was	tes, the above authorized by	e-named the corp	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
•	m familiar with, and accept the obli	igations of, Section (	617.0503, FI	lorida Statutei	5.	
SIGNATURE .	Signature, typed or printed name of registered a	agent and title it applicable.	(NO	TE: Registered Age	nt signature	re required when reinstating) DATE
12.	OFFICERS A	ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD		DELETE	1.1 TITLE		Change Addition
NAME	Rudert, Donald G			1.2 NAME		
STREET ADDRESS	876 W COLONIAL DR			1.3 STREET	address	
CITY-ST-ZIP	DAYTONA BEACH FL		1 55. 555	1.4 CITY - S		
TITLE	SD	L	DELETE	2.1 TITLE		S.D. THOMPSONGORDON, PATRICIA A. Change Addition 1453 Eden Drive Deltona, FL. 32725
NAME	HULL, DALE			2.2 NAME		THOMPSONG ORDAY) THIRICIAL A.
STREET ADDRESS	1040 LAKE PLEASANT RD.			2.3 STREET	ADDRESS	1453 Eden Drive
CITY - ST - ZIP	APOPKA FL		Thruct	2.4 CITY-	ST-ZIP	Deltona, r.L. 32725
TITLE	VD	i_	DELETE	3.1 TITLE		Change Addition
NAME	HILL, ALFRED JR			3.2 NAME	4000000	<u> </u>
STREET ADDRESS	2649 BELMONT AVE NEW SMYRNA BEACH FL			3.3 STREET		
CITY-ST-ZIP TITLE	TD		DELETE	3.4. CITY - : 4.1 TITLE	51 - ZIP	Change Addition
NAME		L.,	J DELETE	4.1 INLE		C. C. Ran Mar C. C. Andrews
STREET ADDRESS	PINDER, CLAYTON 3409 KNOTT WAY			4.3 STREET	Annoree	
CITY - ST - ZIP	DELAND FL			4.3 STREET		}
TITLE	DECAMP 1 E		DELETE	5.1 TITLE	11-21r	Change Addition
NAME		<u>.</u>		5.2 NAME		The control of the co
STREET ADDRESS	i.			5.3 STREET	ADDRESS	
CITY-ST-ZIP				5.4 CITY-S		
TITLE		Γ	DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		-		6.2 NAME		
STREET ADDRESS				6.3 STREET	ADDRESS	
CITY-ST-ZIP				6.4 City - S		
	by certify that the information suppl	ind with this filing de	nes not quel			stated in Section 119 07/3)(i) Florida Statutes I further certify that the

I do nereby certify that the infor information indicated on this ap I am an officer or director of the appears in Block 12 or Block on supprised with this goes not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that peralton or the receiver or frusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name yanged, green an attack) ment with an address.