SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

F06400

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| D/WWW II | en del no tam, mo | | | | | | |
|--------------------------------------|--|---|-------------------------|---------------------|--|-------------|--|
| Principal Place | of Business | Mailing Address | | | T I BURTINGU KINT OMIRA DIRIK BIDAK OBAHLI BURIK BIRAK BIDAK BIDAK BIDAK BIRAK BIDAK BIDAK BIRAK BIRAK BIDAK BIRAK | | |
| 7030 NW 23F Gaihesville US | | 7030 NW 23RD WAY GAIHESVILLE FL 3265 US | 3 | | 3. Date Incorporated or Qualified 3a. Date of Last Repo | ort | |
| 2. Principal Pia | ace of Business | 2a. Mailing Address | | | | ed For | |
| 21 | | 26 | | | | pplicable | |
| Suite, Apt. #, etc. | | Suite, Apt #, etc | | | 5 Certificate of Status Desired Section \$8.75 Additional | | |
| 22 | | 27 | | | 5. Certificate of Status Desired L. Fee Requi | ired | |
| City & State | | City & State | | | 6. Election Campaign Financing \$5.00 May Be | | |
| Zip Country | | Z _{ID} Country | | | Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199 032, | | |
| 24 | 25 | 29 | 30 | | Florida Statutes Yes No | | |
| | 9. Name and Address of Currer | | | | 10. Name and Address of New Registered Agent | | |
| DA | MOICO DETTY | | 81 | Name | | | |
| DAMPIER, BETTY 7030 N.W. 23RD WAY | | | 82 | Street Addr | dress (P.O. Box Number is Not Acceptable) | | |
| GAINESVILLE FL 32606 | | | | | | | |
| - | | | 83 | i | | | |
| | | | 84 | City | FL 85 Zip Coo | de | |
| 11 Purcuant | o the provisions of Sastrons 607 050 | N and 607 1609 Florida State | ites the above | a named com | poration submits this statement for the purpose of changing its reg | nietorad | |
| l office or re | ogistered agent, or both, in the State in familiar with, and accept the oblig | of Florida, Such change was | authorized by | the corporati | ion's board of directors. Thereby accept the appointment as regis | stered | |
| • | n tamiliar with, and accept the oblig | ations or, Section 607,0005, n | TOTIOA STATUTE: | • | | | |
| SIGNATURE | Signature, typed or printed nan elof registered agr | ent and tille if application (No | OTE Registered Ag | ent Signature requi | red when renstuting) DAIE | | |
| 12. | OFFICERS AN | ID DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I | | |
| TITLE | STD | DELETE | 1 1 TITLE | | Criange | Addition | |
| NAME | DAMPIER, BETTY | | 1.2 NAME | | | | |
| STREET ADDRESS | 7030 N.W. 23RD WAY | | | T ADDRESS | | | |
| CITY-ST-ZIP TITLE | GAINESVILLE FL | DELETE | 1.4 CITY - 2.1 TITLE | ST-ZIP | Change | Addition | |
| NAME | DP DAMBIED WILD A | | DELETE 2111(LE | | County: | 1 7.03.1.51 | |
| STREET ADDRESS | DAMPIER, WILBUR A 7030 N.W. 23RD WAY | | | T ADDRESS | | | |
| CITY - ST - ZIP | GAINESVILLE FL | | 2 4 City | | | | |
| TITLE | DV | DELETE | 3 1 TITLE | 0, 2 | Change | Addition | |
| NAME | DAMPIER, BRENDA JEAN | | 3 2 NAME | | | | |
| STREET ADDRESS | 7030 N.W. 23RD WAY | | 3 3 STREE | TADORESS | | | |
| ČITY - ŠT - ZIP | GAINESVILLE FL | | 3.4 CITY | ST ZIF | | · | |
| TITLE | | L OELETE | 4.1 HILE | | Change | Addition | |
| NAME | | | 4 2 NAM | | | | |
| STREET ADDRESS | | | | T ADDRESS | | | |
| CITY-ST-ZIP | | DELETE | 4 4 CITY - | | Change | Addition | |
| TITLE | | | 5 1 TITLE | | | 3 Machigan | |
| NAME STREET ADDRESS | | | 5.2 NAME 5.3 STREE | T ADDRESS | | | |
| CITY-ST-ZIP | | | 5.4 CITY - | 1 | | | |
| TITLE | | DELETE | 6 1 TaTLE | er kil | Change | Addition | |
| NAME | | | 62 NAME | | | - | |
| STREET ADDRESS | | | | T ADDRESS | | | |
| CITY+ST-ZIP | | | 6 4 CITY - | ST-ZIP | | | |
| 44 Ldo borok | and the state of t | at the state fit and the last execution | | | 14. for the augmention stated in Courties 110 07/2)/Id. Florido Ctol. | des l | |

4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statules. I further certify that the information indicated on his 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 617. Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Belle Campier SIGNATURE AND EXPEDITION OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 31,1996 904-378. 2659