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FILED
May 05 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 164403 (8)
 1. Corporation Name
SETZER'S WAREHOUSING CORPORATION, INC.



Principal Place of Business: **50 NORTH LAURA STREET SUITE 900 JACKSONVILLE FL 32202-4388**
 Mailing Address: **50 NORTH LAURA STREET SUITE 3900 JACKSONVILLE FL 32202-3622**

3. Date Incorporated or Qualified: **02/28/1951**
 3a. Date of Last Report: **04/19/1996**

2. Principal Place of Business: **21 1 Independent Drive**
 Suite, Apt. #, etc.: **22 Suite 2401**
 City & State: **23 Jacksonville, Florida**
 Zip: **24 32202** Country: **25 Duval**

4. FEI Number: **59-0842405**
 Applied For: Not Applicable
 5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
 6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2a. Mailing Address: **26 1 Independent Drive**
 Suite, Apt. #, etc.: **27 Suite 2401**
 City & State: **28 Jacksonville, Florida**
 Zip: **29 32202** Country: **30 Duval**

10. Name and Address of New Registered Agent:
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

9. Name and Address of Current Registered Agent:
INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVENUE
SUITE 3000
MIAMI FL 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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 signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		DELETE
TITLE	D	<input checked="" type="checkbox"/>
NAME	SETZER, LEONARD R	
STREET ADDRESS	2623 FOREST POINT CT	
CITY-ST-ZIP	JACKSONVILLE, FL 00000	
TITLE	P	<input type="checkbox"/>
NAME	SETZER, LEONARD R.	
STREET ADDRESS	2623 FOREST POINT CT	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	ST	<input type="checkbox"/>
NAME	BENTLEY, ALAN C	
STREET ADDRESS	2321 LIBERTY STREET	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	D	<input type="checkbox"/>
NAME	BLANKSTEIN, DANIEL	
STREET ADDRESS	2321 LIBERTY ST	
CITY-ST-ZIP	JAX FL 32206	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		CHANGE	ADDITION
1.1 TITLE	Receiver per Court Order	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1.2 NAME	John H. Lining		
1.3 STREET ADDRESS	1 Independent Dr., Suite 2401		
1.4 CITY-ST-ZIP	Jacksonville, FL 32202		
2.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
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.

SIGNATURE: *John H. Lining* (904) 358-1206 APR 28 1997
 John H. Lining, Receiver per Court Order

CR2E034 (9/96)