

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 21 AM 9:01

DOCUMENT # 285825 (6)
1. Corporation Name
3900 TRAIL CO

Principal Place of Business	Mailing Address
2600 S W 27TH AVE MIAMI FL 33133	2600 S W 27TH AVE MIAMI FL 33133

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 10/07/1964	3a. Date of Last Report 01/21/1994
4. FEI Number 59-1107244	Applied For Not Applicable

2. Principal Place of Business	2a. Mailing Address	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
22. City & State	27. City & State	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
23. Zip	28. Zip		
24. Country	29. Country		

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
TATHAM, THOMAS L 2600 S W 27TH AVE MIAMI, FL 33133	81. Name
	82. Street Address (P.O. Box Number is Not Acceptable)
	83.
	84. City FL 85. 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 _____ DATE _____
(Type or print name of registered agent and the corporation) (Type Registered Agent's name and address)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TATHAM, BERNICE	1.2 NAME	
STREET ADDRESS	2600 S W 27TH AVE	1.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI, FL 00000	1.4 CITY-ST-ZIP	
TITLE	VSD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TATHAM, THOMAS L	2.2 NAME	
STREET ADDRESS	2600 S W 27TH AVE	2.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI, FL 00000	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY-ST-ZIP	
TITLE		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		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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Thomas S. Tatham* **2-16-95** **305/4446-1967**
(Type or print name of signing officer or director) Date Telephone Number
Thomas S. Tatham, VP