

2-11-97 B-16718 C
 FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 11 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 # 303002 (0)

1. Corporation Name
 COLONIAL RIDGE LANCASTER INC



Principal Place of Business
 5505 NORTH OCEAN BOULEVARD
 OCEAN RIDGE FL 33435

Mailing Address
 5505 NORTH OCEAN BOULEVARD
 OCEAN RIDGE FL 33435-7066

3. Date Incorporated or Qualified 03/17/1966
 3a. Date of Last Report 03/26/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number 59-1316811
 Applied For Not Applicable

22. Suite, Apt. #, etc.

27. Suite, Apt. #, etc.

5. Certificate of Status Desired \$8.75 Additional Fee Required

23. City & State

28. City & State

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24. Zip Country

29. Zip Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GROMKO & PORTER, INC.
 306 E. BOYNTON BEACH BLVD.
 BOYNTON BEACH FL 33435

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 *[Signature]* DATE 1/20/97
 Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
 NAME TAIBI, CHARLES
 STREET ADDRESS 5505 N OCEAN BLVD
 CITY-ST-ZIP OCEAN RIDGE FL

1.1 TITLE Change Addition
 1.2 NAME RICHARD TAYLOR
 1.3 STREET ADDRESS 5505 N OCEAN BLVD
 1.4 CITY-ST-ZIP OCEAN RIDGE, FLA 33435

TITLE DELETE
 NAME INGHAM, GRANT
 STREET ADDRESS 5505 N OCEAN BLVD
 CITY-ST-ZIP OCEAN RIDGE FL

2.1 TITLE Change Addition
 2.2 NAME D. PAUL KASSY
 2.3 STREET ADDRESS 5505 N OCEAN BLVD
 2.4 CITY-ST-ZIP OCEAN RIDGE, FLA 33435

TITLE DELETE
 NAME VALINE, MARGARET
 STREET ADDRESS 5505 N OCEAN BLVD
 CITY-ST-ZIP OCEAN RIDGE FL

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE DELETE
 NAME GRIGSBY, D J
 STREET ADDRESS 5505 N OCEAN BLVD
 CITY-ST-ZIP OCEAN RIDGE FL

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.1 TITLE Change Addition
 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: *[Signature]* DATE 2/5/97 DAYTIME PHONE # 361-7370123
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)