FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

Amended

PROFIT CORPORATION ANNUAL REPORT **1996**

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

389647

DOCUMENT # COACH ESTATES, INC.
1. Corporation Name
2411 JACKSON Bluff Road
Tallahassee, FLorida 32304

Principal Place of Business: SAME
Mailing Address: SAME

3. Date Incorporated or Qualified	3a. Date of Last Report: 1996
4. FEI Number: 59-1230584	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	

2. Principal Place of Business
21 2411 Jackson Bluff
22 Suite, Apt. #, etc.
23 City & State: Tallahassee
24 Zip: 32304 25 Country: LEON

2a. Mailing Address
26 SAME
27 Suite, Apt. #, etc.
28 City & State
29 Zip 30 Country

9. Name and Address of Current Registered Agent

PACE Allen
2411 Jackson Bluff Rd
Tallahassee, FL 32304

10. Name and Address of New Registered Agent

81 Name: JAMES H. Bailey
82 Street Address (P.O. Box Number is Not Acceptable): 2411 JACKSON BLUFF Rd
83
84 City: Tallahassee FL 85 Zip Code: 32304

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: James H. Bailey JAMES H. BAILEY DATE: 6-21-96

12. OFFICERS AND DIRECTORS

TITLE	PACE Allen	[X] DELETE
NAME	PRES, SEC, TREAS.	
STREET ADDRESS	DIRECTOR	
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	[X] Change [X] Addition
1.2 NAME	JAMES H. BAILEY	
1.3 STREET ADDRESS	2411 JACKSON BLUFF RD	
1.4 CITY-ST-ZIP	TALLAHASSEE, FL 32304	
2.1 TITLE	SECRETARY	[X] Change [X] Addition
2.2 NAME	JAMES H. BAILEY	
2.3 STREET ADDRESS	2411 JACKSON BLUFF RD	
2.4 CITY-ST-ZIP	TALLAHASSEE, FL 32304	
3.1 TITLE	Treasurer	[X] Change [X] Addition
3.2 NAME	JAMES H. Bailey	
3.3 STREET ADDRESS	2411 JACKSON BLUFF RD	
3.4 CITY-ST-ZIP	TALLAHASSEE, FL 32304	
4.1 TITLE	Director	[X] Change [X] Addition
4.2 NAME	JAMES H. Bailey	
4.3 STREET ADDRESS	2411 JACKSON BLUFF RD	
4.4 CITY-ST-ZIP	TALLAHASSEE, FL 32304	
5.1 TITLE		[ ] Change [ ] Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		[ ] Change [ ] Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James H. Bailey JAMES H. BAILEY 6-21-96 904 5762398
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)

CS 8/13/96