

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 388418 (6)

1. Corporation Name
IDLEWHILE, INC.



Principal Place of Business Mailing Address
1616 S. 14TH ST 1616 S. 14TH ST
P O BOX ~~491046~~ 490300 P O BOX ~~491046~~ 490300
LEESBURG FL ~~34749-0300~~ LEESBURG FL ~~34749-0300~~
34749-0300 34749-0300

3. Date Incorporated or Qualified 09/14/1971 3a. Date of Last Report 05/01/1995
4. FEI Number 59-1414488 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 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DAVIS, RANTSON E F. Browne Gregg
1321 W CITIZENS BLVD 1616 S. 14th Street
LEESBURG FL 32748 P. O. Box 490300
Leesburg, FL 34749-0300

81 Name F. Browne Gregg
82 Street Address (P.O. Box Number is Not Acceptable) 1616 S. 14th Street (Zip 34748)
83 P. O. Box 490300
84 City Leesburg, FL 85 Zip Code 34749-0300

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 *F. Browne Gregg*
Signature, typed or printed name of registered agent or officer/director

DATE 4-2-96
Date Registered Agent Signature Expires (typed)

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	DAVIS, RANTSON E	
STREET ADDRESS	1321 W CITIZEN BLVD	
CITY-ST-ZIP	LEESBURG, FL 00000	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	GREGG, F. BROWNE	
STREET ADDRESS	1616 S 14TH ST	
CITY-ST-ZIP	LEESBURG, FL 00000 34749-0300	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Delete Rantson Davis since F. Browne Gregg is sole owner now.
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	Leesburg, FL 34749-0300
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 in Block 12 or Block 13 if checked, or on an attachment with an address.

SIGNATURE: *F. Browne Gregg*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/96

352-787-0608

CR2E034 (12/95)