


**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**  
**May 16 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 601864 (2)**

1. Corporation Name  
~~NASON, GILDAN, YEAGER, GERSON & WHITE, P.A.~~  
 NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.

Principal Place of Business 1645 PALM BCH LKS BLVD SUITE 1200 WEST PALM BCH FL 33401	Mailing Address 1645 PALM BCH LKS BLVD SUITE 1200 WEST PALM BCH FL 33401-2285
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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. Zip
25. Country	30. Country

3. Date Incorporated or Qualified 12/31/1969	3a. Date of Last Report 02/27/1996
4. FEI Number 59-1280063	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent GILDAN, HERBERT L 520 OVERLOOK DR NORTH PALM BEACH FL 33408	10. Name and Address of New Registered Agent 81 Name John White II 82 Street Address (P.O. Box Number is Not Acceptable) 1645 Palm Beach Lakes Boulevard 83 Suite 1200 84 City West Palm Beach FL 85 Zip Code 33401
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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: *John White II* (NOTE: Registered Agent signature required when reinstating) DATE: 4/16/97

12. OFFICERS AND DIRECTORS	
TITLE STD	<input checked="" type="checkbox"/> DELETE
NAME GILDAN, HERBERT L	
STREET ADDRESS 520 OVERLOOK DR	
CITY-ST-ZIP NORTH PALM BEACH FL	
TITLE PD	<input type="checkbox"/> DELETE
NAME YEAGER, THOMAS J	
STREET ADDRESS 118 PEGASUS DR.	
CITY-ST-ZIP JUPITER FL	
TITLE D	<input type="checkbox"/> DELETE
NAME GERSON, GARY	
STREET ADDRESS 2035 EMBASSY DR	
CITY-ST-ZIP WEST PALM BCH. FL	
TITLE DAS	<input type="checkbox"/> DELETE
NAME WHITE II, JOHN	
STREET ADDRESS 1645 PALM BCH LAKES 1200	
CITY-ST-ZIP WEST PALM BCH. FL	
TITLE DAS	<input checked="" type="checkbox"/> DELETE
NAME GILDAN, PHILIP G	
STREET ADDRESS 1645 PALM BCH LKS	
CITY-ST-ZIP W PALM BCH FL	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE D/AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME Alan I. Armour II	
1.3 STREET ADDRESS 1645 Palm Beach Lakes Blvd., Suite 1200	
1.4 CITY-ST-ZIP West Palm Beach, FL 33401	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	800002195848
2.3 STREET ADDRESS	05/30/97--01034--013
2.4 CITY-ST-ZIP	***165.00
3.1 TITLE D/VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME Gary N. Gerson	
3.3 STREET ADDRESS 2035 Embassy Drive	
3.4 CITY-ST-ZIP West Palm Beach, FL 33401	
4.1 TITLE D/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME John White II	
4.3 STREET ADDRESS 1645 Palm Beach Lakes Blvd., Suite 1200	
4.4 CITY-ST-ZIP West Palm Beach, FL 33401	
5.1 TITLE D/T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME Domenick R. Lioce	
5.3 STREET ADDRESS 1645 Palm Beach Lakes Blvd., Suite 1200	
5.4 CITY-ST-ZIP West Palm Beach, FL 33401	
6.1 TITLE D/AVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME Mark A. Pachman	
6.3 STREET ADDRESS 1645 Palm Beach Lakes Blvd., Suite 1200	
6.4 CITY-ST-ZIP West Palm Beach, FL 33401	

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 White II* John White II 04/16/97 (561) 686-3307

CR2E034 (9/96)

5-16-97