

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

APPROVED AND FILED *1073*

97 MAY 19 PM 2:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 602017 (6)

1. Corporation Name
~~HOOG~~, ALLEN, NORTON & BLUE, P.A.
NAME CHANGE See ATTACHED letter

Principal Place of Business 121 MAJORCA CORAL GABLES FL 33134	Mailing Address 121 MAJORCA CORAL GABLES FL 33134-4508
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 03/26/1970	3a. Date of Last Report 08/09/1996
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 59-1287650	Applied For <input type="checkbox"/> Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Country	29. Country	30. 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 NORTON, ROBERT L. 121 MAJORCA CORAL GABLES FL 33134		10. Name and Address of New Registered Agent		
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 _____
Signature, typed or printed name of registered agent and fee if applicable (NONE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12	
TITLE	DTS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NORTON, ROBERT L.	1.2 NAME	700002180967--5
STREET ADDRESS	121 MAJORCA	1.3 STREET ADDRESS	-05/21/97--01098--001
CITY-ST-ZIP	CORAL GABLES, FL 00000	1.4 CITY-ST-ZIP	***165.00 ***165.00
TITLE	DP	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALLEN, REYNOLDS	2.2 NAME	
STREET ADDRESS	121 MAJORCA	2.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES, FL 00000	2.4 CITY-ST-ZIP	
TITLE	DV	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLUE, JAMES M.	3.2 NAME	
STREET ADDRESS	121 MAJORCA	3.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES, FL 00000	3.4 CITY-ST-ZIP	
TITLE	ADDITIONAL OFFICERS (SEE ATTACHED)	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 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]* **5/19/97** **305-445-7801**

CR2E034 (9/96)

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Hogg Allen Norton & Blue, P.A.
121 Majorca
Coral Gables, Florida 33134
#602017 (6)
FEI # 59-1287650

Additional Officers and Directors:

<u>Name & Address:</u>	<u>Title:</u>
Susan P. Norton 121 Majorca Coral Gables, Florida 33134	DV
Mark E. Levitt 121 Majorca Coral Gables, Florida 33134	DV
Wayne L. Helsby 121 Majorca Coral Gables, Florida 33134	DV
Michael Mattimore 121 Majorca Coral Gables, Florida 33134	DV
David J. Stefany 121 Majorca Coral Gables, Florida 33134	DV
Peter L. Sampo 121 Majorca Coral Gables, Florida 33134	DV
Gail G. Holtzman 121 Majorca Coral Gables, Florida 33134	DV
Rodolfo Gomez 121 Majorca Coral Gables, Florida 33134	DV

LAW OFFICES
HOGG, ALLEN, NORTON & BLUE
PROFESSIONAL ASSOCIATION

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MIAMI OFFICE
SUITE 300
121 MAJORCA
CORAL GABLES, FLORIDA 33134
305/445-7801
TELECOPY 305/442-1578

ORLANDO OFFICE
SIGNATURE PLAZA, SUITE 810
201 SOUTH ORANGE AVENUE
ORLANDO, FLORIDA 32801
407/843-0437
TELECOPY 407/422-7388

TALLAHASSEE OFFICE
SUITE 305
215 SOUTH MONROE STREET
TALLAHASSEE, FLORIDA 32301
904/561-3503
TELECOPY 904/561-0332

TAMPA OFFICE
HYDE PARK PLAZA, SUITE 350
324 SOUTH HYDE PARK AVENUE
TAMPA, FLORIDA 33606
813/251-1210
TELECOPY 813/253-2006

REPLY TO: Coral Gables

March 31, 1997

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: 602017, Federal ID #59-1287650

Dear Sir or Madame:

Enclosed are copies of our Amendments to our Articles of Incorporation. The officers of the Corporation were elected on January 2, 1997 and on March 26, 1997 we amended the name from Hogg, Allen, Norton & Blue, P.A. to Allen, Norton & Blue, P.A. Please make these changes.

A check is also enclosed in the amount of \$96.25, to be applied as follows:

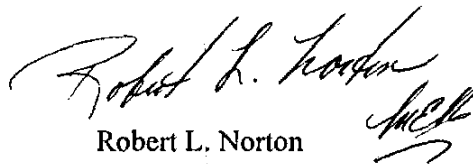
\$35.00 for the filing fee for the Articles of Amendment

\$52.50 for a Certified copy of the Amendment

\$8.75 for a certificate of status

Please do not hesitate to call or write if I may assist you any further. Thank you.

Very truly yours,


Robert L. Norton
Secretary Treasurer