

FILE NOW: FILING FEE IS \$61.25

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May 28 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 768840 (1)

1. Corporation Name
5550 PROFESSIONAL BUILDING ASSOCIATION, INC.



Principal Place of Business

5550 26TH ST. W
SUITE 8
BRADENTON FL 34207-3514
US

Mailing Address

5550 26TH STREET WEST
SUITE 8
BRADENTON FL 34207-3514
US

3. Date Incorporated or Qualified
06/09/1983

3a. Date of Last Report
04/26/1996

2. Principal Place of Business

21 5550 26th St. W.

Suite, Apt. #, etc.

22 Suite 7

City & State

23 Bradenton FL

Zip

24 34207-3514

Country

25 US

2a. Mailing Address

26 5550 26th St. W.

Suite, Apt. #, etc.

27 Suite 7

City & State

28 Bradenton FL

Zip

29 34207-3514

Country

30 US

4. FEI Number

59-2407216

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

9. Name and Address of Current Registered Agent

GOLDMAN HOWARD A.
5550 28TH STREET WEST
SUITE 8
BRADENTON FL 34207

10. Name and Address of New Registered Agent

81 Name A.H. Kitchner III
82 Street Address (P.O. Box Number is Not Acceptable)
5550 26th Street West
83 Suite 7
84 City Bradenton FL 85 Zip Code 34207

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE [Signature]
Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE 4-25-97

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	GOLDMAN HOWARD A.	
STREET ADDRESS	5550 26TH ST. W., #8	
CITY-ST-ZIP	BRADENTON FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	FRENCH MICHELLE	
STREET ADDRESS	5550 26TH ST. W., #8	
CITY-ST-ZIP	BRADENTON FL	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	TIDMORE, WILLIAM	
STREET ADDRESS	5550 26TH STREET WEST # 2	
CITY-ST-ZIP	BRADENTON FL 34207	
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

1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Kitchner A.H.	
1.3 STREET ADDRESS	5550 26th St. W., #7	
1.4 CITY-ST-ZIP	BRADENTON FL 34207	
2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Deborah K. Jackson	
2.3 STREET ADDRESS	5550 26th St. W. #7	
2.4 CITY-ST-ZIP	BRADENTON FL 34207	
3.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Goldman, Howard	
3.3 STREET ADDRESS	5550 26th St. W. # 8	
3.4 CITY-ST-ZIP	BRADENTON FL 34207	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE 4-25-97

DAYTIME PHONE # 941-753-3053

CR2E037 (9/96)