

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

FILED

**Feb 24 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F90501 (0)
 1. Corporation Name
ADVANCED BUSINESS PRODUCTS, INC.



Principal Place of Business 2539 COOLIDGE AVENUE ORLANDO FL 32804	Mailing Address 2539 COOLIDGE AVENUE ORLANDO FL 32804-4858
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 07/13/1982	3a. Date of Last Report 04/24/1996
21. Suite, Apt #, etc.	26. Suite, Apt #, etc.	4. FEI Number 59-2202703	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	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
ACORD, LARRY J 3310 E ESTHER ST ORLANDO FL 32806		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: _____ (NOTE: Registered Agent signature required when reappointing) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ACORD, LARRY J	1.2 NAME	
STREET ADDRESS	3310 E ESTHER ST	1.3 STREET ADDRESS	
CITY - ST - ZIP	ORLANDO FL	1.4 CITY - ST - ZIP	
TITLE	STD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHAPMAN, HOPE M.	2.2 NAME	
STREET ADDRESS	3310 E ESTHER ST	2.3 STREET ADDRESS	
CITY - ST - ZIP	ORLANDO FL	2.4 CITY - ST - ZIP	
TITLE	PD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAWSON, BILL	3.2 NAME	
STREET ADDRESS	3463 EDGEWATER DR	3.3 STREET ADDRESS	
CITY - ST - ZIP	ORLANDO FL	3.4 CITY - ST - ZIP	
TITLE	VPD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BETTERIDGE, HAROLD	4.2 NAME	
STREET ADDRESS	10012 TRILLIUMS DR	4.3 STREET ADDRESS	
CITY - ST - ZIP	ORLANDO FL	4.4 CITY - ST - ZIP	
TITLE	VPD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAMPBELL, D AVID	5.2 NAME	
STREET ADDRESS	1097 CHOKE CHERRY DR	5.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER SPRINGS FL	5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	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: *Bill Lawson* **REQUIRED** Date: **1/7/97** Daytime Phone #: **407/422-7437**

CR2E034 (9/96)