

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

FILED

Mar 20 1997 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
 1997



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

DOCUMENT # H28776 (3)
 1. Corporation Name
1207 CORPORATION



Principal Place of Business Mailing Address
4700 SOUTHSIDE BLVD.
P.O. BOX 19026F
JACKSONVILLE FL 32216

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 11/05/1984	3a. Date of Last Report 02/02/1996
21. State, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 59-2460692	Applied For 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	7. 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 HELMICK, JOHN P., JR. 4700 SOUTHSIDE BLVD. JACKSONVILLE FL 32216	10. Name and Address of New Registered Agent
81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	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 reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	DP HELMICK, JOHN P., JR. 4700 SOUTHSIDE BLVD. JACKSONVILLE FL	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	V HELMICK, CLAUDETTE B. 4700 SOUTHSIDE BLVD. JACKSONVILLE FL	1.2 NAME	
CITY, ST, ZIP	S HELMICK, MARC A. 4700 SOUTHSIDE BLVD. JACKSONVILLE FL	1.3 STREET ADDRESS	
TITLE	AS LOVE, THOMAS 4700 SOUTHSIDE BLVD. JACKSONVILLE FL	1.4 CITY-ST-ZIP	
DELETE	<input type="checkbox"/>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
DELETE	<input type="checkbox"/>	2.2 NAME	
DELETE	<input type="checkbox"/>	2.3 STREET ADDRESS	
DELETE	<input type="checkbox"/>	2.4 CITY-ST-ZIP	
DELETE	<input type="checkbox"/>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
DELETE	<input type="checkbox"/>	3.2 NAME	
DELETE	<input type="checkbox"/>	3.3 STREET ADDRESS	
DELETE	<input type="checkbox"/>	3.4 CITY-ST-ZIP	
DELETE	<input type="checkbox"/>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
DELETE	<input type="checkbox"/>	4.2 NAME	
DELETE	<input type="checkbox"/>	4.3 STREET ADDRESS	
DELETE	<input type="checkbox"/>	4.4 CITY-ST-ZIP	
DELETE	<input type="checkbox"/>	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
DELETE	<input type="checkbox"/>	5.2 NAME	
DELETE	<input type="checkbox"/>	5.3 STREET ADDRESS	
DELETE	<input type="checkbox"/>	5.4 CITY-ST-ZIP	
DELETE	<input type="checkbox"/>	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
DELETE	<input type="checkbox"/>	6.2 NAME	
DELETE	<input type="checkbox"/>	6.3 STREET ADDRESS	
DELETE	<input type="checkbox"/>	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 is based on the 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 Book 12 of Block 1207.

SIGNATURE: *Sandra B. Mortham* *Thomas Love* 3/17/97 904-642-5111
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone Number

CR2E034 (9/96)