

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED AND FILED

95 MAY -1 AM 9:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **J78547** (3)
1. Corporation Name
HCRM CORP.

Principal Place of Business Mailing Address
% JOSEPH R. COOK
2200 CORPORATE BLVD N.W., SUITE 401
BOCA RATON FL 33431

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **06/15/1987** 3a. Date of Last Report **04/25/1994**
4. FEI Number **59-2819457** Applied For
Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing **\$5.00 May Be Added to Fees**
Trust Fund Contribution
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

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 Country 29 Zip Country 30

9. Name and Address of Current Registered Agent
HUNT, COOK R MEHR &
2200 CORPORATE BLVD NW
STE 401
BOCA RATON FL 33431

10. Name and Address of New Registered Agent
81 Name **HUNT, COOK, RIGGS, MEHR & MILLER, P.A.**
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 title if applicable (NOTE: Registered Agent signature required when remaining)

12. OFFICERS AND DIRECTORS

| | |
|-----------------|---------------------------------------|
| TITLE | VPO |
| NAME | COOK, JOSEPH R. |
| STREET ADDRESS | 2200 CORPORATE BLVD NW STE 401 |
| CITY - ST - ZIP | BOCA RATON FL |
| TITLE | PD |
| NAME | HUNT, ROBERT J. |
| STREET ADDRESS | 2200 CORPORATE BLVD NW STE 401 |
| CITY - ST - ZIP | BOCA RATON FL |
| TITLE | TD |
| NAME | RIGGS, DAVID A. |
| STREET ADDRESS | 2200 CORPORATE BLVD NW STE 401 |
| CITY - ST - ZIP | BOCA RATON FL |
| TITLE | SD |
| NAME | MEHR, RYNA E. |
| STREET ADDRESS | 2200 CORPORATE BLVD NW STE 401 |
| CITY - ST - ZIP | BOCA RATON FL |
| TITLE | D |
| NAME | MILLER, LAWRENCE J |
| STREET ADDRESS | 2200 CORPORATE BLVD NW STE 401 |
| CITY - ST - ZIP | BOCA RATON FL |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|--------------------|---|
| 1. TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12 NAME | |
| 13 STREET ADDRESS | |
| 14 CITY - ST - ZIP | |
| 21 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 22 NAME | |
| 23 STREET ADDRESS | |
| 24 CITY - ST - ZIP | |
| 31 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 32 NAME | |
| 33 STREET ADDRESS | |
| 34 CITY - ST - ZIP | |
| 41 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 42 NAME | |
| 43 STREET ADDRESS | |
| 44 CITY - ST - ZIP | |
| 51 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 52 NAME | |
| 53 STREET ADDRESS | |
| 54 CITY - ST - ZIP | |
| 61 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 62 NAME | |
| 63 STREET ADDRESS | |
| 64 CITY - ST - ZIP | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Joseph R. Cook DIRECTOR 4/27/95 (407) 997-9223
DATE: _____ (Signature Please)