

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **K37368**
1. Corporation Name
AVANTI PROPERTY CORPORATION

(3) *OK to pay my*



Principal Place of Business: % CHARLES SCHWARTZ, 431 EAST HORATIO AVENUE, SUITE 210, MAITLAND FL 32751
Mailing Address: % CHARLES SCHWARTZ, 431 EAST HORATIO AVENUE, SUITE 210, MAITLAND FL 32751

2. Principal Place of Business (21-24) and 2a. Mailing Address (26-29) fields for Suite, Apt. #, etc., City & State, Zip, and Country.

3. Date Incorporated or Qualified: 10/07/1988
3a. Date of Last Report: 04/07/1995
4. FEI Number: 59-2919842
5. Certificate of Status Desired:
6. Election Campaign Financing Trust Fund Contribution:
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: SCHWARTZ, CHARLES, 431 EAST HORATIO AVENUE, SUITE 210, MAITLAND FL 32751
10. Name and Address of New Registered Agent (81-84) fields for Name, Street Address, City, and 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: Signature, typed or printed name of registered agent and the filer. (NOTE: Registered Agent signature required when changing)

12. OFFICERS AND DIRECTORS
 TITLE: PD
 NAME: SCHWARTZ, CHARLES
 STREET ADDRESS: 431 E HORATIO AVE., #21
 CITY-ST-ZIP: MAITLAND FL
 TITLE: VD
 NAME: LOEB, DONALD E.
 STREET ADDRESS: 22 ST CLAIR AVE, E, 1700
 CITY-ST-ZIP: TORONTO, ONT., CANADA
 TITLE: ST
 NAME: SCHMIDT, DIANE G.
 STREET ADDRESS: 431 E. HORATIO AVE #210
 CITY-ST-ZIP: MAITLAND FL
 TITLE: [] DELETE
 NAME: [] DELETE
 STREET ADDRESS: [] DELETE
 CITY-ST-ZIP: [] DELETE
 TITLE: [] DELETE
 NAME: [] DELETE
 STREET ADDRESS: [] DELETE
 CITY-ST-ZIP: [] DELETE
 TITLE: [] DELETE
 NAME: [] DELETE
 STREET ADDRESS: [] DELETE
 CITY-ST-ZIP: [] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 1.1 TITLE: [] Change [] Addition
 1.2 NAME: [] Change [] Addition
 1.3 STREET ADDRESS: [] Change [] Addition
 1.4 CITY-ST-ZIP: [] Change [] Addition
 2.1 TITLE: [] Change [] Addition
 2.2 NAME: [] Change [] Addition
 2.3 STREET ADDRESS: [] Change [] Addition
 2.4 CITY-ST-ZIP: [] Change [] Addition
 3.1 TITLE: ST
 3.2 NAME: CHILDRESS, JANET
 3.3 STREET ADDRESS: 431 E. Horatio Ave, #210
 3.4 CITY-ST-ZIP: Maitland, FL 32751
 3.5 TITLE: [] Change [] Addition
 3.6 NAME: [] Change [] Addition
 3.7 STREET ADDRESS: [] Change [] Addition
 3.8 CITY-ST-ZIP: [] Change [] Addition
 4.1 TITLE: [] Change [] Addition
 4.2 NAME: [] Change [] Addition
 4.3 STREET ADDRESS: [] Change [] Addition
 4.4 CITY-ST-ZIP: [] Change [] Addition
 5.1 TITLE: [] Change [] Addition
 5.2 NAME: [] Change [] Addition
 5.3 STREET ADDRESS: [] Change [] Addition
 5.4 CITY-ST-ZIP: [] Change [] Addition
 6.1 TITLE: [] Change [] Addition
 6.2 NAME: [] Change [] Addition
 6.3 STREET ADDRESS: [] Change [] Addition
 6.4 CITY-ST-ZIP: [] Change [] Addition

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: *Charles Schwartz* Charles Schwartz, Pres. 4/3/96 407/628-8488
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)