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Mar 03 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 # N08405 (5)

1. Corporation Name  
ALERT 96, INC.



Principal Place of Business Mailing Address  
218 S. MONROE STREET TALLAHASSEE FL 32301 218 S. MONROE STREET TALLAHASSEE FL 32301-1824

3. Date Incorporated or Qualified 03/27/1985 3a. Date of Last Report 05/31/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number 59-2958735	Applied For Not Applicable
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 City & State	27 City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 Zip Country	28 Zip Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes No
24	29	30	

9. Name and Address of Current Registered Agent CARRUTHERS SCOTT 218 S. MONROE ST TALLAHASSEE FL 32301	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE C/D	DELETED	1.1 TITLE P/D	Change Addition
NAME ROSELLI, RICHARD		1.2 NAME	
STREET ADDRESS 700 SE THIRD AVENUE, STE 100		1.3 STREET ADDRESS	
CITY-ST-ZIP FT. LAUDERDALE FL 33316		1.4 CITY-ST-ZIP	
TITLE D	DELETED	2.1 TITLE T/D	Change Addition
NAME SLAWSON, RICHARD		2.2 NAME Liggio, Jeffrey M.	
STREET ADDRESS 2401 PGA BLVD, STE 140		2.3 STREET ADDRESS 213 Southern Blvd.	
CITY-ST-ZIP PALM BEACH GARDENS FL 33410		2.4 CITY-ST-ZIP West Palm Beach, Fl. 33405	
TITLE PSD	DELETED	3.1 TITLE S/D	Change Addition
NAME CARRUTHERS, SCOTT		3.2 NAME	
STREET ADDRESS 218 S. MONROE ST.		3.3 STREET ADDRESS	
CITY-ST-ZIP TALLAHASSEE FL 32301		3.4 CITY-ST-ZIP	
TITLE VC/T	DELETED	4.1 TITLE V/D	Change Addition
NAME KELAHER, JAMES		4.2 NAME	
STREET ADDRESS 390 N. ORANGE AVE., STE 1500		4.3 STREET ADDRESS	
CITY-ST-ZIP ORLANDO FL 32801		4.4 CITY-ST-ZIP	
TITLE	DELETED	5.1 TITLE D	Change Addition
NAME		5.2 NAME Roth, Neal A.	
STREET ADDRESS		5.3 STREET ADDRESS 2665 S. Bayshore Dr.	
CITY-ST-ZIP		5.4 CITY-ST-ZIP Miami, Fl. 33133	
TITLE	DELETED	6.1 TITLE	Change 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Scott Carruthers REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)