


FILE NOW: FILING FEE IS \$61.25

FILED

**Feb 04 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000003381 (7)

1. Corporation Name
INTER-CITY UPBEAT, INC.



Principal Place of Business 528 CHEERFUL STREET WEST PALM BEACH FL 33407	Mailing Address 528 CHEERFUL STREET WEST PALM BEACH FL 33407
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3. Date Incorporated or Qualified
06/10/1997

4. FEI Number
65-0763401

Applied For	<input type="checkbox"/>
Not Applicable	<input checked="" type="checkbox"/>

2. Principal Place of Business	2a. Mailing Address
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21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
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22 City & State	27 City & State
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23 Zip	25 Country	29 Zip	30 Country
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**TIPTON, TOMMY
500 MICHIGAN PLACE
WEST PALM BEACH FL 33409**

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

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

TITLE	P	<input type="checkbox"/> DELETE
NAME	TIPTON, TOMMY	
STREET ADDRESS	500 MICHIGAN PLACE	
CITY-ST-ZIP	W. PALM BEACH FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	ELLIOTT, HAROLD	
STREET ADDRESS	4958 PINECONE LN	
CITY-ST-ZIP	W. PALM BEACH FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	HIGHTOWER, RANDY	
STREET ADDRESS	% 528 CHEERFUL STREET	
CITY-ST-ZIP	WEST PALM BEACH FL 33407	
TITLE	S	<input type="checkbox"/> DELETE
NAME	MONTGOMERY, JANICE	
STREET ADDRESS	% 528 CHEERFUL STREET	
CITY-ST-ZIP	WEST PALM BEACH FL 33407	
TITLE	T	<input type="checkbox"/> DELETE
NAME	HOWARD, VERONICA	
STREET ADDRESS	% 528 CHEERFUL STREET	
CITY-ST-ZIP	WEST PALM BEACH FL 33407	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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: _____ **SIGNATURE REQUIRED** 1/10/98 561-615-0328

CR2E037 (10/97)