

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

APPROVED AND FILED
 1995 APR 26 PM 3:11
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # P20514 (6)

1. Corporation Name

DRISKILL INVESTMENTS LTD. CORPORATION

Principal Place of Business
**4800 OCEAN BV
 BOYNTON BCH FL 33435**

Mailing Address
**4800 OCEAN BV
 BOYNTON BCH FL 33435**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **08/17/1988** 3a. Date of Last Report **02/22/1994**

4. FEI Number **11-2204037** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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

8. This corporation has liability for intangible tax under S. 100.032, 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

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DRISKILL, WALTER S.
 4800 OCEAN BLVD.
 BOYNTON BEACH FL 33435**

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 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 title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

**PTD
 DRISKILL, WALTER S.
 4333 N. OCEAN BLVD.
 DELRAY BEACH FL**

1 1 TITLE
 1 2 NAME
 1 3 STREET ADDRESS
 1 4 CITY - ST - ZIP

Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

**SD
 DRISKILL, LUCIENNE B.
 4333 N. OCEAN BLVD.
 DELRAY BEACH FL**

2 1 TITLE
 2 2 NAME
 2 3 STREET ADDRESS
 2 4 CITY - ST - ZIP

Change Addition

**400001466954
 -04/27/95--01068--014
 *****200.00 *****200.00**

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

**AS
 BARNARD, RONALD L.
 33 N. LASALLE STREET
 CHICAGO IL**

3 1 TITLE
 3 2 NAME
 3 3 STREET ADDRESS
 3 4 CITY - ST - ZIP

Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

4 1 TITLE
 4 2 NAME
 4 3 STREET ADDRESS
 4 4 CITY - ST - ZIP

Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

5 1 TITLE
 5 2 NAME
 5 3 STREET ADDRESS
 5 4 CITY - ST - ZIP

Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

6 1 TITLE
 6 2 NAME
 6 3 STREET ADDRESS
 6 4 CITY - ST - ZIP

Change Addition

*See
 Y-26*

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 110.07(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 manager 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 in an attachment with an address.

SIGNATURE:

WALTER S. DRISKILL, PRESIDENT

467-276-9378