

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 19 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1997**



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

DOCUMENT # P93000081012 (5)
 1. Corporation Name
W.L. APARTMENTS, INC.



Principal Place of Business Mailing Address
WALDEN LAKEWOOD APTS. 602 E. ALEXANDER STREET PLANT CITY FL 33566

2. Principal Place of Business 2a. Mailing Address
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
 22 City & State 27 City & State
 23 Zip Country 28 Zip Country
 24 25 29 30

3. Date Incorporated or Qualified **11/23/1993** 3a. Date of Last Report **08/14/1996**
 4. FEI Number **65-0449888** 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. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
WALDEN, LAKEWOOD APARTMENTS % KAREN KING 602 E. ALEXANDER STREET PLANT CITY FL 33566

10. Name and Address of New Registered Agent
 81 Name **WALDEN LAKEWOOD APTS c/o Roy PINGSTONE**
 82 Street Address (P.O. Box Number is Not Acceptable) **602 E. ALEXANDER ST**
 83
 84 **PLANT CITY FL** 85 Zip Code **33566**

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 **ROY PINGSTONE REGIONAL V.P.** DATE **3/11/97**

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	RICHMAN, RICHARD P	
STREET ADDRESS	10 VALLEY DR	
CITY-ST-ZIP	GREENWICH CT 06831	
TITLE	D	<input type="checkbox"/> DELETE
NAME	RICHELSON, ERIC	
STREET ADDRESS	570 TAXTER RD SUITE 420	
CITY-ST-ZIP	ELMSFORD NY 10523	
TITLE	VCD	<input checked="" type="checkbox"/> DELETE
NAME	BACH, SUSAN	
STREET ADDRESS	570 TAXTER ROAD	
CITY-ST-ZIP	ELMSFORD NY	
TITLE	S	<input type="checkbox"/> DELETE
NAME	REID, DEBRA	
STREET ADDRESS	570 TAXTER ROAD SUITE 420	
CITY-ST-ZIP	ELMSFORD FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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 checked="" type="checkbox"/> Addition
3.2 NAME	REGIONAL VICE PRES ROY PINGSTONE
3.3 STREET ADDRESS	840 5TH AVE
3.4 CITY-ST-ZIP	VERO BEACH, FL 32960
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 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 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if changed, or on an attachment with an address.

SIGNATURE: **1/29/97 511-770-4440**

CR2E034 (9/96)