

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

FILED

**May 09 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000012464 (1)

1. Corporation Name
THE WEITZ-BACHMAN GROUP, INC.



Principal Place of Business 3461 BONITA BAY BLVD., STE. 201 BONITA SPRINGS FL 33823	Mailing Address 3461 BONITA BAY BLVD., STE. 201 BONITA SPRINGS FL 34134-4374
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3. Date Incorporated or Qualified 02/10/1994	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0472038	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

**BACHMAN, ROBERT A
3461 BONITA BAY BLVD., STE. 201
BONITA SPRINGS FL 33823**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

85. Zip Code
FL 34134

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEITZ, FRED W	1.2 NAME	
STREET ADDRESS	800 SECOND AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	DES MOINES IA 50309	1.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EACHMAN, ROBERT A.	2.2 NAME	
STREET ADDRESS	3461 BONITA BAY BLVD, SUITE 201	2.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL	2.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, KATHLEEN M.	3.2 NAME	
STREET ADDRESS	3461 BONITA BAY BLVD., SUITE 201	3.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL	3.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LENTZ, STEPHEN	4.2 NAME	
STREET ADDRESS	3461 BONITA BAY BLVD., SUITE 201	4.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Stephen Lentz **Treasurer** Date: 4-28-97 Daytime Phone #: 941-947-4552

CR2E034 (9/96)