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

PROFIT CORPORATION ANNUAL REPORT



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

1996

P95000002701 (7)

DOCUMENT # CORNERSTONE PARTNERS 52, INC. Principal Place of Business Mailing Address 1077 HIGHWAY A1A 1077 HIGHWAY ATA SATELLITE BEACH FL 32937 SATELLITE BEACH FL 32937 3. Date Incorporated or Qualified 3a. Date of Last Report 01/11/1995 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 7800 E. Kemper Road 26 7800 E. Kemper Road Not Applicable Suite Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Cincinnati, OH Cincinnati, OH 23 Trust Fund Contribution 28 Added to Fees Country Country Zin Zio 8. This corporation has liability for intangible tax under s. 199.032, USA Yes X No 25 USA 29 Florida Statutes 24 45249 45249 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Wilson Atkinson DEHARDER, ROBERT Street Address (P.O. Box Number is Not Acceptable) 82 1077 HIGHWAY A1A Atkinson, Diner, Stone, Black & Mankuta P.A SATELLITE BEACH FL 32937 83 1945 Tyler Street Zip Code 33022 Ciry 85 Hollywood 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 byth, in the State of Physick. Somethar appointment as registered agent. Lam ida Statutes SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Addition TITLE 1 1 TITLE VP DEHARDER, ROBERT Deharder, Robert NAME 1.2 NAME 1077 HIGHWAY A1A 1077 Highway AlA STREET ADDRESS 1.3 STREET ADDRESS SATELLITE BEACH FL 32937 CITY-ST-7IP 14 CITY - ST 7/P Satellite Beach FL 32937 DELETE Change TITLE 2.1 ICSE Addition W.O. Brisben NAME 2.2 NAME 7800 East Kemper Road STREET ADDRESS 2.3 STREET ADDRESS Cincinnati, OH 45249 CITY - ST - ZIP 2.4 CITY - \$1-7/P TITLE □ DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS **3.3 STREET ADDRESS** CITY-ST-ZIP 3.4 Cith - St - ZiP DELETE 4 1 TELE Change Addition TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-S!-ZIP 44 CHT SI-ZP DELETE TITLE 5 ! Tiflef Change 400001829254 5.2 NAME NAME -05/20/96--01043--028 STREET ADDRESS 5.3 STREET ADDRESS ***225.00 CITY-ST-ZP 54 City-S1-2P DELETE Change Addition TITLE 6 1 TIFLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and dues not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutos. I further certify that the information indicated on this arruph report or supplemental arrival report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the control atom or the receiver trustee emprovered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 or Block 13 if changes, or on an attachment with an address.

SIGNATURE: 🗸

CITY-ST-ZIP

William O. Brisben WIIIIAM U. Brisben
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR May 1, 1996

(513) 489-1990

CR2E034 (12/95)