

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

PROFIT CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **P95000008325 (9)**

1. Corporation Name

**FRENCHMAN'S CREEK REALTY, INC.**



Principal Place of Business <b>13495 TOURNAMENT DRIVE PALM BEACH GARDENS FL 33410</b>	Mailing Address <b>13495 TOURNAMENT DRIVE PALM BEACH GARDENS FL 33410</b>
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3. Date Incorporated or Qualified <b>02/01/1995</b>	3a. Date of Last Report
4. FEI Number <b>65-0580680</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input 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 Country	28 Zip Country
24	29
25	30

9. Name and Address of Current Registered Agent

**RYAN, JAMES H  
701 U.S. HWY. ONE  
SUITE 402  
NORTH PALM BEACH FL 33408**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	<b>FL</b>
83	
84 City	

11. Pursuant to the provisions of Sections 607.0502 and 607.1503 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 \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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 checked="" type="checkbox"/> Addition
1.2 NAME	<b>P/D Gilbert A. Schlesinger</b>
1.3 STREET ADDRESS	<b>3266 Degas Drive East</b>
1.4 CITY-ST-ZIP	<b>Palm Beach Gardens, FL 33410</b>
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	<b>S/D Chris Gigliotti</b>
2.3 STREET ADDRESS	<b>3161 Monet Drive</b>
2.4 CITY-ST-ZIP	<b>Palm Beach Gardens, FL 33410</b>
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	<b>D Adolph Lovler</b>
3.3 STREET ADDRESS	<b>2880 Le Bateau Drive</b>
3.4 CITY-ST-ZIP	<b>Palm Beach Gardens, FL 33410</b>
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	<b>D Seymour Spira</b>
4.3 STREET ADDRESS	<b>3819 Toulouse Drive</b>
4.4 CITY-ST-ZIP	<b>Palm Beach Gardens, FL 33410</b>
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	<b>500001869105</b>
5.3 STREET ADDRESS	<b>-06/20/96--01026--041</b>
5.4 CITY-ST-ZIP	<b>***225.00</b>
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 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 or is changed or on an attachment with an address.

SIGNATURE: **Gilbert A. Schlesinger** 5/22/96 (561)694-2387

CR2E034 (12/95)

*6-19-96*  
*Jic*