

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

FILED
Jul 02 1996 8:00 am
Secretary of State

DOCUMENT # P95000080995 (0)

1. Corporation Name
SPS HOLDINGS, INC.



Principal Place of Business
**2121 CORNELL STREET
SARASOTA FL 34237**

Mailing Address
**2121 CORNELL STREET
SARASOTA FL 34237**

3. Date Incorporated or Qualified
10/23/1995

3a. Date of Last Report

4. FEI Number
65-0614803

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

26 2a. Mailing Address

27 Suite, Apt. #, etc.

28 City & State

29 Zip Country

30

9. Name and Address of Current Registered Agent

**FIELDSTONE, RONALD R
200 S. BISCAYNE BLVD.
SUITE 2100
MIAMI FL 33131**

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

11. Pursuant to the provisions of Sections 607.0902 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 607.0905, Florida Statutes.

SIGNATURE: *Russell R Macdonnell*
Signature, typed or printed name of registered agent and the applicable (NOTE: Registered Agent signature required when nonexisting) DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	CHAW, MICHAEL	
STREET ADDRESS	2121 CORNELL STREET	
CITY-ST-ZIP	SARASOTA FL 34237	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ALLEN, RICHARD S	
STREET ADDRESS	2121 CORNELL STREET	
CITY-ST-ZIP	SARASOTA FL 34237	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MACDONNELL, RUSSELL R	
STREET ADDRESS	2121 CORNELL STREET	
CITY-ST-ZIP	SARASOTA FL 34237	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PURCELL, KENNEH E	
STREET ADDRESS	16120 INDEPENDENT SQUARE	
CITY-ST-ZIP	JACKSONVILLE FL 32202	
TITLE	D	<input type="checkbox"/> DELETE
NAME	STEIN, ROBERT L	
STREET ADDRESS	16120 INDEPENDENT SQUARE	
CITY-ST-ZIP	JACKSONVILLE FL 32202	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	V. P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	Pamela Ashby	
13 STREET ADDRESS	2121 Cornell St.	
14 CITY-ST-ZIP	Sarasota FL 34237	
21 TITLE	# S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	Andrew Taub	
23 STREET ADDRESS	2121 Cornell Street	
24 CITY-ST-ZIP	Sarasota FL 34237	
31 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	Walter McCrae	
33 STREET ADDRESS	2121 Cornell St.	
34 CITY-ST-ZIP	Sarasota FL 34237	
41 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	John Kuhne	
43 STREET ADDRESS	2121 Cornell St	
44 CITY-ST-ZIP	Sarasota, FL 34237	
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	000001883280	
63 STREET ADDRESS	-07/03/96--01040--005	
64 CITY-ST-ZIP	***225.00	

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 if changed, or on an attachment with an address

SIGNATURE: *Richard Allen* 5/1/96 207-889-7200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE

CR2E034 (12/95)