

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

**FILED**

**Feb 17 1997 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

**DOCUMENT # P96000024470 (2)**  
1. Corporation Name  
**YANKEE BRAVO, INCORPORATED**

Principal Place of Business <b>967 PONTE VEDRA BLVD PONTE CEDRA BEACH FL 32082</b>	Mailing Address <b>967 PONTE VEDRA BLVD PONTE CEDRA BEACH FL 32082-3524</b>
---	--

3. Date Incorporated or Qualified <b>03/19/1996</b>	3a. Date of Last Report
4. FEI Number <b>59-3372698</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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 21 <b>967 Ponte Vedra Blvd.</b>	2a. Mailing Address 26 <b>1514 Nira Street</b>
22 State, Apt. #, etc.	27 State, Apt. #, etc.
23 City & State <b>Ponte Vedra Beach, FL</b>	28 City & State <b>Jacksonville, FL</b>
24 Zip <b>32082</b>	25 Country
29 Zip <b>32207</b>	30 Country <b>Duval</b>

9. Name and Address of Current Registered Agent  
**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLHASSEE FL 32301-2525**

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
			<b>FL</b>	

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: *Jason M. Gregg* (NOTE: Registered Agent signature required when reinstating) DATE: *Feb 17 1997*

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>GREGG, JASON A</b>	
STREET ADDRESS	<b>967 PONTE VEDRA BOULEVARD</b>	
CITY-ST-ZIP	<b>PONTE CEDRA BEACH FL 32082</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>P/T/S/D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>Gregg, Jason A.</b>	
1.3 STREET ADDRESS	<b>967 Ponte Vedra Blvd.</b>	
1.4 CITY-ST-ZIP	<b>Ponte Vedra Beach, FL 32082</b>	
2.1 TITLE	<b>S</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	<b>Gregg, Ursula K.</b>	
2.3 STREET ADDRESS	<b>967 Ponte Vedra Blvd.</b>	
2.4 CITY-ST-ZIP	<b>Ponte Vedra Beach, FL 32082</b>	

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: *Jason M. Gregg* Mr. Jason Gregg *Feb 17 1997* 904-273-9049  
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)