


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

FILED

**Feb 04 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # P97000002285 (9)

1. Corporation Name
FANKHAUSER PROPERTIES, INC.



Principal Place of Business 5387 LOCH LEVEN COURT DUBLIN OH 43017	Mailing Address 5387 LOCH LEVEN COURT DUBLIN OH 43017
---	---

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/09/1997

2. Principal Place of Business 21 222 BEACH RD Suite, Apt. #, etc. 22 4 City & State 23 SARASOTA, FL Zip 24 34242	2a. Mailing Address 26 222 BEACH RD Suite, Apt. #, etc. 27 4 City & State 28 SARASOTA, FL Zip 29 34242	4. FEI Number 58-2283579	Applied For <input type="checkbox"/> Not Applicable
Country 25 USA	Country 30 USA	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent ICARD MERRILL CULLIS TIMM FUREN & GINSBURG, PA, ATTN: F. THOMAS HOPKINS 2033 MAIN ST, STE 600 SARASOTA FL 34237		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

10. Name and Address of New Registered Agent

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

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 _____ (Signature, typed or printed name of registered agent and title if applicable.) (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 FANKHAUSER, PHILIP G		1.2 NAME	
STREET ADDRESS 5387 LOCH LEVEN COURT		1.3 STREET ADDRESS	
CITY-ST-ZIP DUBLIN OH 43017		1.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FANKHAUSER, KATHLEEN L		2.2 NAME	
STREET ADDRESS 5387 LOCH LEVEN COURT		2.3 STREET ADDRESS	
CITY-ST-ZIP DUBLIN OH 43017		2.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FANKHAUSER, BROCK L		3.2 NAME	
STREET ADDRESS 5387 LOCH LEVEN COURT		3.3 STREET ADDRESS 222 BEACH RD # 4	
CITY-ST-ZIP DUBLIN OH 43017		3.4 CITY-ST-ZIP SARASOTA, FL 34242	
TITLE D	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FANKHAUSER, ADAM M		4.2 NAME	
STREET ADDRESS 5387 LOCH LEVEN COURT		4.3 STREET ADDRESS	
CITY-ST-ZIP DUBLIN OH 43017		4.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FANKHAUSER, MOLLIE K		5.2 NAME	
STREET ADDRESS 5387 LOCH LEVEN COURT		5.3 STREET ADDRESS	
CITY-ST-ZIP DUBLIN OH 43017		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 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: Brock L Fankhauser **FANKHAUSER** 1/13/98 (941)346-8658

CR2E034 (10/97)