

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # S13292 (5)
1. Corporation Name
FACILICORP, INC.



Principal Place of Business: 2165 SUNNYDALE BLVD SUITE C CLEARWATER FL 34625 US
Mailing Address: 2165 SUNNYDALE BLVD SUITE C CLEARWATER FL 34625 US

2. Principal Place of Business: 21 12200 34 st. N. 22 Unit F 23 Clearwater, FL. 24 34622 25 PINELUS
2a. Mailing Address: 26 12200 34 st. N. 27 Unit F 28 Clearwater, FL. 29 34622 30 PINELUS

3. Date Incorporated or Qualified: 10/15/1990
3a. Date of Last Report: 06/30/1995
4. FEI Number: 59-3176616
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

9. Name and Address of Current Registered Agent
POLETZ, RANDY
255 SAGE ROAD
CRYSTAL BEACH FL 34681

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

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: *Randy Poletz* President
Signature typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE:

12. OFFICERS AND DIRECTORS
TITLE: P POLETZ, WM R. DELETE
NAME: POLETZ, WM R.
STREET ADDRESS: 255 SAGE ROAD
CITY - ST - ZIP: CRYSTAL BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE: Change Addition
1.2 NAME: P Poletz, Wm. R.
1.3 STREET ADDRESS: 155 SAGE RD.
1.4 CITY - ST - ZIP: CRYSTAL BEACH, FL. 34681

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Randy Poletz* President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)