

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

PROFIT CORPORATION ANNUAL REPORT 1997



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

FILED

97 AUG -1 AM 9:58

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DOCUMENT # V13705 (1)
 1. Corporation Name
CARPER & ANDREWS, INC.

Principal Place of Business: **426 N.E. ELKCAM BLVD. PORT CHARLOTTE FL 33952**
 Mailing Address: **426 N.E. ELKCAM BLVD. PORT CHARLOTTE FL 33952**

3. Date Incorporated or Qualified: **02/05/1992**
 3a. Date of Last Report: **05/28/1996**

2. Principal Place of Business
 21 **31830 N. Washington Ip. Rd.**
 Suite, Apt. #, etc.
 22
 2a. Mailing Address
 26 **31830 N. Washington Ip. Rd.**
 Suite, Apt. #, etc.
 27

4. FEI Number: **65-0309213**
 Applied For:
 Not Applicable:

City & State
 23 **Punta Gorda, FL**
 Zip Country
 24 **33982** 25 **Charlotte**
 28 **Punta Gorda, FL**
 Zip Country
 29 **33982** 30 **Charlotte**

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
HALL, THOMAS P.
3443D TAMiami TRAIL
PORT CHARLOTTE FL 33952

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.0308, 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D CARPER, GEORGE R., III	1.2 NAME	
STREET ADDRESS	426 N.W. ELKCAM BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	PT. CHARLOTTE FL	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D ANDREWS, THOMAS P.	2.2 NAME	
STREET ADDRESS	327 KENSINGTON	2.3 STREET ADDRESS	31830 N. Washington loop Road
CITY-ST-ZIP	PT CHARLOTTE FL	2.4 CITY-ST-ZIP	Punta Gorda, FL. 33982
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	400002260784--6
STREET ADDRESS		4.3 STREET ADDRESS	-08/07/97--01079--002
CITY-ST-ZIP		4.4 CITY-ST-ZIP	***\$550.00 ***\$550.00
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		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 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: _____ (6/2/97) 94-1039-1788

CR2E034 (9/96)