

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -4 PM 11:52

DOCUMENT # 285196 (2)
1. Corporation Name
2460 CORPORATION

Principal Place of Business Mailing Address
2460 SOUTH FEDERAL HIGHWAY BOYNTON BEACH FL 33435 **2460 SOUTH FEDERAL HIGHWAY BOYNTON BEACH FL 33435**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26		09/17/1964	03/18/1994
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	Applied For
23 City & State		28 City & State		59-1387070	Not Applicable
24 Zip		29 Country		5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
25		30		6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
				7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
HOWELLS, MARGARET L 2460 S. FEDERAL HWY. APT. 15 BOYNTON BCH FL 33435				B1	Name		
				B2	Street Address (P.O. Box Number is Not Acceptable)		
				B3			
				B4	City	FL	B5

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 Margaret L. Howells (Signature, typed or printed name of registered agent, and title if applicable) 3/6/95
(NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD <u>Margaret L. Howells</u>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOWELLS, MARGARET L.	1.2 NAME	
STREET ADDRESS	2460 S. FEDERAL HWY.	1.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BCH FL	1.4 CITY - ST - ZIP	
TITLE	TD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAKER, FLORENCE	2.2 NAME	
STREET ADDRESS	2460 S. FEDERAL HWY.	2.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BCH FL	2.4 CITY - ST - ZIP	
TITLE	PD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZARANSKI, HENRY P	3.2 NAME	
STREET ADDRESS	2460 S FEDERAL HWY	3.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BCH FL	3.4 CITY - ST - ZIP	
TITLE	VPO	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KORNMEYER, HAROLD H	4.2 NAME	
STREET ADDRESS	2460 S FEDERAL HWY	4.3 STREET ADDRESS	VPO LOUIS IUDICA 2460 S. FEDERAL HWY.
CITY - ST - ZIP	BOYNTON BEACH FL	4.4 CITY - ST - ZIP	BOYNTON BEACH, FL.
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZARANSKI, MARIE A	5.2 NAME	
STREET ADDRESS	2460 S. FEDERAL HWY.	5.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BEACH FL	5.4 CITY - ST - ZIP	
TITLE		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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Henry P. Zaranski **HENRY P. ZARANSKI** 3-8-94 407.737-3162
(Signature and Title or Printed Name of Signing Officer or Director) (Date) (Telephone Number)