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FILED
Feb 14 1997 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
1997



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

DOCUMENT # 218441 (4)
 1. Corporation Name
STEED GROVES, INC.



Principal Place of Business: **POST OFFICE BOX 700056 ST. CLOUD FL 34770**
 Mailing Address: **POST OFFICE BOX 700056 ST. CLOUD FL 34770-0056**

3. Date Incorporated or Qualified: **12/23/1958**
 3a. Date of Last Report: **07/22/1996**
 4. FEI Number: **59-0845420**
 Applied For: Applied For Not Applicable
 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

2. Principal Place of Business: 21 Suite, Apt. #, etc.: 22 City & State: 23 Zip: 24 Country: 25
 2a. Mailing Address: 26 Suite, Apt. #, etc.: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent
STEVEN R. BECHTEL/MATEER & HARBERT
225 E. ROBINSON ST. STE 600
ORLANDO FL 32801

10. Name and Address of New Registered Agent
 81 Name: 82 Street Address (P.O. Box Number is Not Acceptable): 83 City: 84 City: **FL** 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	VD	<input type="checkbox"/> DELETE
NAME	PLATT, KATHERINE S	
STREET ADDRESS	7 OLD HUNT RD	
CITY - ST - ZIP	NORTHBROOK IL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	URBAN, ALICE S.	
STREET ADDRESS	1814 PEPPERIDGE DR.	
CITY - ST - ZIP	ORLANDO FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	STEED, JOSEPH B	
STREET ADDRESS	5000 E IRLO BRONSON HIGH	
CITY - ST - ZIP	ST. CLOUD FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	STEED, WILLIAM J., JR.	
STREET ADDRESS	690 OSCEOLA #204	
CITY - ST - ZIP	WINTER PARK FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	BECHTEL, STEVEN	
STREET ADDRESS	225 E. ROBINSON	
CITY - ST - ZIP	ORLANDO FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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: *Steven R. Bechtel* **REQUIRED** 2/17/97 (407) 425-9044
 Steven R. Bechtel, Secretary/Treasurer

CR2E034 (9/96)