

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 286994 (9)

1. Corporation Name
2542 CORPORATION



Principal Place of Business Mailing Address
**2542 SO FEDERAL HWY
APT 3
BOYNTON BEACH FL 33435** **2542 SO FEDERAL HWY
APT 3
BOYNTON BEACH FL 33435**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/12/1964	3a. Date of Last Report 05/01/1995
21	22	23	24	4. FEI Number 28-6994600	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
21 Suite, Apt. #, etc.		22 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 City & State		24 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Zip Country		25 Zip Country		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DI DONATO, HENRY R.
2542 S FEDERAL HWY
APT 3
BOYNTON BEACH FL 33435**

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: *Henry R. Di Donato*

(NOTE: Registered Agent Signature required when reinstating)

3/6/96

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DIDONATO, HENRY R.	1.2 NAME	DICKERSON, ANN
STREET ADDRESS	2542 SOUTH FED HWY #3	1.3 STREET ADDRESS	2542 SOUTH FED HWY #11
CITY - ST - ZIP	BOYNTON BCH., FL 00000	1.4 CITY - ST - ZIP	BOYNTON BCH., FL 33435
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DICKERSON, BENJAMIN	2.2 NAME	
STREET ADDRESS	2542 SOUTH FED HWY #11	2.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BEACH FL	2.4 CITY - ST - ZIP	
TITLE	ST <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PASCHON, GLORIA I.	3.2 NAME	
STREET ADDRESS	2542 S FED HWY #7	3.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BCH., FL 00000	3.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILCOX, RUTH	4.2 NAME	
STREET ADDRESS	2542 S FED HWY #16	4.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BCH, FL 00000	4.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIDONATO, RUTH	5.2 NAME	
STREET ADDRESS	2542 S FED HWY #3	5.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BCH FL	5.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AVALLE, CATHERINE P	6.2 NAME	
STREET ADDRESS	2542 SOUTH FED #10	6.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BEACH FL	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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Henry R. Di Donato*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/6/96

(407) 734-4389

Date

Daytime Phone #

CR2E034 (12/95)