

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

FILED

Feb 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 307876 (3)

1. Corporation Name
FINLEY INVESTMENT CO.

Principal Place of Business 3069 E. CARRIGAN CANYON DR. SALT LAKE CITY UT 84109 US	Mailing Address P.O. BOX 521236 SALT LAKE CITY UT 84152
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/03/1966	3a. Date of Last Report 01/30/1996
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1224632	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

PETROSKI, BARBARA J.
100 W LUCERNE CIR
SUITE 504
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name	Erich Huemer
82 Street Address (P.O. Box Number is Not Acceptable)	7400 International Drive
83	
84 City	Orlando
85 Zip Code	FL 32819

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 *Erich Huemer* DATE 1/10/97
(NOTE: Registered Agent Signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAMILTON, FINLEY M	1.2 NAME	
STREET ADDRESS	2120 SOUTH 1300 EAST	1.3 STREET ADDRESS	3069 Carrigan Canyon Dr
CITY-ST-ZIP	SALT LAKE CITY UT 84106	1.4 CITY-ST-ZIP	Salt Lake City, UT 84109
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETERSON, MARILYN H	2.2 NAME	
STREET ADDRESS	2120 SOUTH 1300 EAST	2.3 STREET ADDRESS	3069 E Carrigan Canyon Dr.
CITY-ST-ZIP	SALT LAKE CITY UT 84106	2.4 CITY-ST-ZIP	Salt Lake City, UT 84109
TITLE	S <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TOBLER, JENNIFER	3.2 NAME	
STREET ADDRESS	2120 SOUTH 1300 EAST	3.3 STREET ADDRESS	3069 E. Carrigan Canyon Dr.
CITY-ST-ZIP	SALT LAKE CITY UT 84106	3.4 CITY-ST-ZIP	Salt Lake City, UT 84109
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
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: *Marilyn H. Peterson* DATE 1/6/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Daytime Phone # 801-487-4048

CR2E034 (9/96)