

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

FILED

Apr 28 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 # 434140 (0)

1. Corporation Name  
CORBETT MANAGEMENT, INC

Principal Place of Business  
998 BELLEVUE AVENUE  
P.O. BOX 2556  
DAYTONA BEACH FL 32114-5162

Mailing Address  
998 BELLEVUE AVENUE  
P.O. BOX 2556  
DAYTONA BEACH FL 32114-5162



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/31/1973		3a. Date of Last Report 04/24/1996	
21	State, Apt. #, etc.	26	State, Apt. #, etc.	4. FEI Number 59-1495669		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 type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

CORBETT, PATRICK E.  
998 BELLEVUE AVENUE  
DAYTONA BEACH FL 32015

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

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)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P CORBETT, PATRICK E <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORBETT, PATRICK E	1.2 NAME	
STREET ADDRESS	142 CORAL CIRCLE	1.3 STREET ADDRESS	
CITY - ST - ZIP	DAYTONA BCH FL	1.4 CITY - ST - ZIP	
TITLE	VP CORBETT, ELIZABETH C. <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORBETT, ELIZABETH C.	2.2 NAME	
STREET ADDRESS	PO BOX 2655 N/A	2.3 STREET ADDRESS	
CITY - ST - ZIP	DAYTONA BCH FL	2.4 CITY - ST - ZIP	
TITLE	D GIBSON, SADIE F <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GIBSON, SADIE F	3.2 NAME	
STREET ADDRESS	345 WILDER BLVD.	3.3 STREET ADDRESS	
CITY - ST - ZIP	DAYTONA BCH FL	3.4 CITY - ST - ZIP	
TITLE	D CORBETT, PATRICK E <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORBETT, PATRICK E	4.2 NAME	
STREET ADDRESS	142 CORAL CIRCLE	4.3 STREET ADDRESS	
CITY - ST - ZIP	DAYTONA BCH FL	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, on an attachment with an address.

SIGNATURE:

P. E. CORBETT 04/21/97 (904) 252-6875

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)