

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 28 PM 2:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **473192** (3)

1. Corporation Name
A CHRISTMAS PLACE, INC.

Principal Place of Business
**600 NE 13TH ST
FT. LAUDERDALE FL 33304**

Mailing Address
**600 NE 13TH ST
FT. LAUDERDALE FL 33304**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
04/21/1975

3a. Date of Last Report
04/29/1994

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		59-1593536		<input type="checkbox"/> Not Applicable	
22. State, Apt. #, etc.		27. Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23. City & State		28. City & State		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Zip		25. Country		29. Zip		30. Country	
24		25		29		30	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
O'NEAL, PATRICK 2900 E. OAKLAND PARK BLVD FT. LAUDERDALE FL				01. Name			
				02. Street Address (P.O. Box Number is Not Acceptable)			
				03.			
				04. City			
				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 _____ DATE _____
Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	ST	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOWELL, GEORGE W	1.2 NAME	
STREET ADDRESS	800 NE 13TH ST	1.3 STREET ADDRESS	
CITY - ST - ZIP	FT LAUDERDALE, FL 00000	1.4 CITY - ST - ZIP	
TITLE	P	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOWELL, MARYLYN HASTY	2.2 NAME	
STREET ADDRESS	800 NE 13TH ST	2.3 STREET ADDRESS	
CITY - ST - ZIP	FT. LAUDERDALE FL	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	Michael W. Howell
STREET ADDRESS		3.3 STREET ADDRESS	1341 SW 178th Way
CITY - ST - ZIP		3.4 CITY - ST - ZIP	Pembroke Pines, FL 33029
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	Catherine H. Wetmiller
STREET ADDRESS		4.3 STREET ADDRESS	31 SE 11th Street
CITY - ST - ZIP		4.4 CITY - ST - ZIP	Pompano Beach, FL 33060
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	Jo Anne Spangler
STREET ADDRESS		5.3 STREET ADDRESS	112 Lake Emerald Drive
CITY - ST - ZIP		5.4 CITY - ST - ZIP	Oakland Park, FL 33309
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)(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 in an attachment with an address.

SIGNATURE: [Signature] X George W. Howell Date: 4/19/95 305-763-1403