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Apr 15 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 # **516455** **(3)**

1. Corporation Name
L.V., INC.

Principal Place of Business
~~14600 SAN PABLO DR N~~
~~JACKSONVILLE FL 32224-2054~~
6146 Beach Blvd.
Jacksonville Fl. 32216

Mailing Address
~~14600 SAN PABLO DR N~~
~~JACKSONVILLE FL 32224-2826~~
← Same

2. Principal Place of Business
21 6146 Beach Blvd.
Suite, Apt. #, etc
22
City & State
23 Jacksonville Fla
Zip 24 32216 Country 25 DUVAL

2a. Mailing Address
26
Suite, Apt. #, etc All Same
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified
10/14/1976

3a. Date of Last Report
05/29/1996

4. FEI Number
59-1696497
[ ] Applied For
[ ] Not Applicable

5. Certificate of Status Desired [X] **$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 [X] No

9. Name and Address of Current Registered Agent
GREENLEAF, V.B.
12352 MACAW DRIVE
JACKSONVILLE FL 32223

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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's signature required when name is listed) DATE

12. OFFICERS AND DIRECTORS

TITLE	Pres S	[ ] DELETE
NAME	VAN DE KAMP, ERIK	
STREET ADDRESS	14600 SAN PABLO DRN	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		[ ] Change [ ] Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Pres (P)	[ ] Change [X] Addition
2.2 NAME	RAY BAKER	
2.3 STREET ADDRESS	10522 OSPREY DR. E	
2.4 CITY-ST-ZIP	JACKSONVILLE FL. 32257	
3.1 TITLE	V.P. (VP)	[ ] Change [X] Addition
3.2 NAME	JERRY MCNAIR	
3.3 STREET ADDRESS	8650 HEATHER RUN DR. S	
3.4 CITY-ST-ZIP	JACKSONVILLE FL. 32256	
4.1 TITLE		[ ] Change [ ] Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		[ ] Change [ ] Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		[ ] Change [ ] 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: Glenn M McKee 4/8/97 904 8558002

CR2E034 (9/96)