

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **533651** (6)

1. Corporation Name
PALACIO DEL SOL, INC.



Principal Place of Business: **1253 PARK ST. CLEARWATER FL 34616**
Mailing Address: **1253 PARK ST. CLEARWATER FL 34616**

2. Principal Place of Business: 21 []
22 []
23 []
24 []
25 []
2a. Mailing Address: 26 **776 THORNWICK DR**
27 []
28 **PITTSBURGH, PA**
29 **15243** 30 **USA**

3. Date Incorporated or Qualified: **05/10/1977**
3a. Date of Last Report: **02/09/1995**
4. FEI Number: **25-1332215**
5. Certificate of Status Desired: [] **\$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 [] No

9. Name and Address of Current Registered Agent
**WARD, R. CARLTON
1253 PARK ST.
CLEARWATER FL 33516**

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: [] DATE: []

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCD	1. TITLE	[] Change [] Addition
NAME	MCCREADY, WILLIAM B, JR	2. NAME	
STREET ADDRESS	776 THORNWICK DR	3. STREET ADDRESS	
CITY-STATE-ZIP	PITTSBURGH, PA 00000	4. CITY-STATE-ZIP	
TITLE	STD	5. TITLE	[] Change [] Addition
NAME	MCCREADY, JAMES	6. NAME	
STREET ADDRESS	311 CANTEBURY DR.	7. STREET ADDRESS	
CITY-STATE-ZIP	PITTSBURGH, PA 00000	8. CITY-STATE-ZIP	
TITLE	VD	9. TITLE	[] Change [] Addition
NAME	MCCREADY, EDWARD L	10. NAME	
STREET ADDRESS	105 DAYTON DR.	11. STREET ADDRESS	
CITY-STATE-ZIP	EASLEY SC	12. CITY-STATE-ZIP	
TITLE	SD	13. TITLE	[] Change [] Addition
NAME	WARD, R CARLTON	14. NAME	
STREET ADDRESS	1253 PARK ST	15. STREET ADDRESS	
CITY-STATE-ZIP	CLEARWATER, FL 00000	16. CITY-STATE-ZIP	
TITLE		17. TITLE	[] Change [] Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY-STATE-ZIP		20. CITY-STATE-ZIP	
TITLE		21. TITLE	[] Change [] Addition
NAME		22. NAME	
STREET ADDRESS		23. STREET ADDRESS	
CITY-STATE-ZIP		24. CITY-STATE-ZIP	
TITLE		25. TITLE	[] Change [] Addition
NAME		26. NAME	
STREET ADDRESS		27. STREET ADDRESS	
CITY-STATE-ZIP		28. CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption status 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 in an attachment with an address.

SIGNATURE: *William B. McCready Jr* DATE: **3/26/96**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE

CR2E034 (12/95)