


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

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**Jan 29 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 545650 (4)
1. Corporation Name
ZOM DEVELOPMENT, INC.



Principal Place of Business 1950 SUMMIT PARK DRIVE SUITE 300 ORLANDO FL 32810	Mailing Address 1950 SUMMIT PARK DRIVE SUITE 300 ORLANDO FL 32810
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/20/1977	
21	26	4. FEI Number 22-2261841	Applied For <input type="checkbox"/> Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
22 City & State		27 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23 Zip		28 Zip		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
24 Country		29 Country		30	

9. Name and Address of Current Registered Agent
**BOSCHMANS, ERIC
2265 LEE ROAD
WINTER PARK FL 32789**

10. Name and Address of New Registered Agent

81 Name	BOSCHMANS, ERIC		
82 Street Address (P.O. Box Number is Not Acceptable)	1950 SUMMIT PARK DRIVE		
83	SUITE 300		
84 City	ORLANDO,	85 State	FL
		86 Zip Code	32810

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.
Eric F. J. Boschmans
Executive Vice President
DATE: **1/14/98**

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ZYDERVELD, JOOST P	
STREET ADDRESS	2269 LEE ROAD	
CITY - ST - ZIP	WINTER PARK FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MOSELER, JOHN A.	
STREET ADDRESS	2269 LEE ROAD	
CITY - ST - ZIP	WINTER PARK FL	
TITLE	VST	<input type="checkbox"/> DELETE
NAME	BOSCHMANS, ERIC, F., J.	
STREET ADDRESS	2269 LEE RD	
CITY - ST - ZIP	WINTER PARK FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	STEPHENS, SAMUEL III	
STREET ADDRESS	2269 LEE RD	
CITY - ST - ZIP	WINTER PARK FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	PATTERSON, STEVEN W	
STREET ADDRESS	2269 LEE ROAD	
CITY - ST - ZIP	WINTER PARK FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	MOSELER, JOHN A.
2.3 STREET ADDRESS	1950 SUMMIT PK. DR. #300
2.4 CITY - ST - ZIP	ORLANDO, FL 32810
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	VST BOSCHMANS, ERIC F.J.
3.3 STREET ADDRESS	1950 SUMMIT PK. DR. #300
3.4 CITY - ST - ZIP	ORLANDO, FL 32810
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	VSTEPHENS, SAMUEL III
4.3 STREET ADDRESS	1950 SUMMIT PK. DR. #300
4.4 CITY - ST - ZIP	ORLANDO, FL 32810
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	P, D PATTERSON, STEVEN W.
5.3 STREET ADDRESS	1950 SUMMIT PK. DR. #300
5.4 CITY - ST - ZIP	ORLANDO, FL 32810
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	V STANLEY, SCOTT R.
6.3 STREET ADDRESS	1950 SUMMIT PK. DR. #300
6.4 CITY - ST - ZIP	ORLANDO, FL 32810

14. I 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. **Eric F. J. Boschmans**

SIGNATURE: **Eric F. J. Boschmans** Executive Vice President
DATE: **1/14/98**
PHONE: **(407) 644-6300**

CR2E094 (10/97)