

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

FILED
Apr 29 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 # 575986 (5)
 Corporation Name
THE CROWN COMPANY LTD.



Principal Place of Business Mailing Address
~~450 CROWN OAK CENTRE DRIVE~~ ~~450 CROWN OAK CENTRE DRIVE~~
~~LONGWOOD FL 32750~~ ~~LONGWOOD FL 32750-0100~~
501 N. Orlando Ave. **501 N. Orlando Avenue**
Suite 313-400 **Suite 313-400**
Winter Park, FL 32789 **Winter Park, FL 32789**

2. Principal Place of Business 2a. Mailing Address
 21 **501 N. Orlando Avenue** 26 **501 N. Orlando Ave.**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 22 **Suite 313-400** 27 **Suite 313-400**
 City & State City & State
 23 **Winter Park, FL** 28 **Winter Park, FL**
 Zip Country Zip Country
 24 **32789** 25 **Orange** 29 **32789** 30 **Orange**

3. Date Incorporated or Qualified **05/25/1978** 3a. Date of Last Report **04/25/1996**
 4. FEI Number **59-2058402** Applied For
 Not Applicable
 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
MONROE, MARK P.
~~450 CROWN OAK CENTRE DRIVE~~
~~LONGWOOD FL 32750~~
501 N. Orlando Avenue, Suite 313-400
Winter Park, FL 32789-7313

10. Name and Address of New Registered Agent
 81 Name **Monroe, Mark P.**
 82 Street Address (P.O. Box Number is Not Acceptable)
501 N. Orlando Avenue
Suite 313-400
 84 City **Winter Park** FL 85 Zip Code **32789**

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 *Mark P. Monroe* 3-5-97 DATE
 Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PST	<input type="checkbox"/> DELETE
NAME	MONROE, MARK P	
STREET ADDRESS	501 N ORLANDO AVE SUITE 313-400	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 *Mark P. Monroe* 3-5-97 (407) 9211 7500 DATE

CR2E034 (9/96)