


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

FILED

Mar 04 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 # 629685 (9) 1. Corporation Name L & M EQUITIES, INC.			
Principal Place of Business C/O FIRST CAPITAL PROP. 400 E SOUTH ST #201 ORLANDO FL 32801 US		Mailing Address C/O FIRST CAPITAL PROP. 400 E SOUTH ST #201 ORLANDO FL 32801-2874 US	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24 25		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30	
9. Name and Address of Current Registered Agent PENNY A MCGHEE FORD FIRST CAPITAL PROPERTY GROUP 400 E SOUTH ST STE 201 ORLANDO FL 32801		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 signature required when reinstating) DATE _____			
12. OFFICERS AND DIRECTORS			
TITLE	STD FOUND, MILDRED	<input type="checkbox"/> DELETE	
NAME	1285 JAMESTOWN DRIVE		
STREET ADDRESS	DAYTONA BEACH FL		
CITY-ST-ZIP			
TITLE	PD FOUND, DAVID L	<input type="checkbox"/> DELETE	
NAME	1285 JAMESTOWN DRIVE		
STREET ADDRESS	DAYTONA BEACH FL		
CITY-ST-ZIP			
TITLE	VD FOUND, KEN	<input type="checkbox"/> DELETE	
NAME	189 KENT ST W		
STREET ADDRESS	LINDSAY ONTARIO, CANADA		
CITY-ST-ZIP			
TITLE	D ENQUIST, GWEN	<input type="checkbox"/> DELETE	
NAME	7214 ABBOTSFORD ST		
STREET ADDRESS	POWELL RIVER B.C. CANADA		
CITY-ST-ZIP			
TITLE	V FOUND, GISELE	<input type="checkbox"/> DELETE	
NAME	1285 JAMESTOWN DRIVE		
STREET ADDRESS	DAYTONA BEACH FL		
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	3219 Woodsmill	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
22 NAME	Melbourne, FL 32934		
23 STREET ADDRESS	P.O. Box 1506		
24 CITY-ST-ZIP	Melbourne, FL 32902-1506		
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	3219 Woodsmill	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
52 NAME	Melbourne, FL 32934		
53 STREET ADDRESS	P.O. Box 1506		
54 CITY-ST-ZIP	Melbourne, FL 32902-1506		
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: <u>David L. Found</u> <u>DAVID L. FOUND</u> <u>Feb 7, 1997</u> <u>407-727-0461</u>			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			



CR2E034 (9/96)