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Jan 17 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 # 653757 (5)

1. Corporation Name
ELECTRONIC SERVICE OF BREVARD, INC.

Principal Place of Business
543 N.COURTENAY PKWY.
MERRITT ISLAND FL 32853

Mailing Address
543 N.COURTENAY PKWY.
MERRITT ISLAND FL 32853-4751



3. Date Incorporated or Qualified 01/28/1980	3a. Date of Last Report 01/24/1996
4. FEI Number 59-1969031	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 State, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24	29

9. Name and Address of Current Registered Agent

HIGHT, EDWARD HERBERT
192 VIA HAVARRE
MERRITT ISLAND FL 32853

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 - am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent's signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	HIGHT, EDWARD H	
STREET ADDRESS	192 VIA HAVARRE	
CITY - ST - ZIP	MERRITT ISLAND FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	HIGHT, JANE M.	
STREET ADDRESS	120 BARBADOS DRIVE	
CITY - ST - ZIP	MERRITT ISLAND FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	HIGHT, HERBERT C	
STREET ADDRESS	120 BARBADOS DRIVE	
CITY - ST - ZIP	MERRITT ISLAND FL	
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

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Treasurer
3.3 STREET ADDRESS	Hight, Herbert C.
3.4 CITY - ST - ZIP	120 Barbados Drive
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Secretary
4.3 STREET ADDRESS	Hight, Carla M.
4.4 CITY - ST - ZIP	192 Via Havarre
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: Edward H. Hight
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/97
Daytime Phone: 407-452-2285

CR2E034 (9/96)