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May 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 751628 (9)
1. Corporation Name
WESTSIDE-DEERFIELD BUSINESSMEN ASSOCIATION, INC.



Principal Place of Business: 275 SW 1ST STREET #1 DEERFIELD BEACH FL 33341
Mailing Address: P.O. BOX 71 DEERFIELD BEACH FL 33443

3. Date Incorporated or Qualified: 03/19/1980
4. FEI Number: 65-0288583
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State: 23 Zip: 24 Country: 25
2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent
THOMPSON, ERNEST
884 SW 3RD AVE
DEERFIELD BEACH FL 33441

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	VICE-PRESIDENT
NAME	KNOWLES, NATHANIEL B.	1.2 NAME	ELECTA POITON
STREET ADDRESS	690 SW 12TH CT	1.3 STREET ADDRESS	95 WEST HILLSBORO BLVD
CITY-ST-ZIP	DEERFIELD BCH. FL	1.4 CITY-ST-ZIP	DEERFIELD BCH, FL 33441
TITLE	D	2.1 TITLE	
NAME	LEWIS, JOHNNY	2.2 NAME	
STREET ADDRESS	192 NW 3RD COURT	2.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BCH. FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	
NAME	RAHMING, LOHMAN	3.2 NAME	
STREET ADDRESS	379 S. DIXIE HIGHWAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BCH. FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	THOMPSON, ERNEST	4.2 NAME	
STREET ADDRESS	242 SW 1ST COURT	4.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BCH. FL	4.4 CITY-ST-ZIP	
TITLE	STD	5.1 TITLE	
NAME	RAGIN, JOHN	5.2 NAME	
STREET ADDRESS	170 SW 3RD AVENUE	5.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BCH. FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	
NAME	PARRISH, TONY	6.2 NAME	
STREET ADDRESS	273 W. HILLSBORO BLVD.	6.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BCH. FL	6.4 CITY-ST-ZIP	

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: NATHANIEL B. KNOWLES DATE: 4-20-98
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/97)