


**FILE NOW: FILING FEE IS \$61.25**

**FILED**  
**Feb 03 1998 8:00am**  
**Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 761298 (9)**  
 1. Corporation Name  
**ALPHA OMEGA RESEARCH FOUNDATION, INC.**



Principal Place of Business 1048 S. OCEAN BLVD. PALM BCH FL 33480 US	Mailing Address 1048 S. OCEAN BLVD. PALM BCH FL 33480 US
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3. Date Incorporated or Qualified <b>12/30/1981</b>	
4. FEI Number <b>59-2121828</b>	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

**9. Name and Address of Current Registered Agent**

**BACINICH, EDWARD J.**  
**1048 S OCEAN BLVD.**  
**PALM BCH FL 33480**

**10. Name and Address of New Registered Agent**

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

**FL**

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: *Edward J. Bacinich* **JAN. 28, 1998**  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**12. OFFICERS AND DIRECTORS**

TITLE	D	<input type="checkbox"/> DELETE
NAME	DAYWITT, WILLIAM C JR	
STREET ADDRESS	140 IROQUOIS DR	
CITY-ST-ZIP	BOULDER CO	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	BACINICH, EDWARD J.	
STREET ADDRESS	1048 S OCEAN BLVD.	
CITY-ST-ZIP	PALM BEACH FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ROSENTHAL, WALTER B DR	
STREET ADDRESS	333 E. 66 STR.P. D	
CITY-ST-ZIP	NEW YORK, NY 00000	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	DEMARCELLUS, JULIETTE	
STREET ADDRESS	357 CRESCENT DR.	
CITY-ST-ZIP	PALM BCH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ODASSO, LORRAINE	
STREET ADDRESS	201 W INDIES DR	
CITY-ST-ZIP	PALM BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KRIZ, THOMAS R	
STREET ADDRESS	305 MARBLE CANYON DR	
CITY-ST-ZIP	W PALM BCH FL	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	KURSUINOGLU, BEHRAM DR.	
1.3 STREET ADDRESS	6200 LEONARDO STR.	
1.4 CITY-ST-ZIP	CORAL GABLES, FL 33146	
2.1 TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	BACINICH, MARIA L.	
2.3 STREET ADDRESS	1048 S. OCEAN BLVD.	
2.4 CITY-ST-ZIP	PALM BEACH, FL 33480	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
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 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: *Maria L. Bacinich* **JAN. 28, 1998** **561-833-2222**  
 PRESIDENT

CR2E037 (10/97)