

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.26).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Sep 10 1997 8:00am
Secretary of State

DOCUMENT # 762786 (2)
1. Corporation Name
UNITED RESIDENTS OF BEVERLY HILLS, INCORPORATED

Principal Place of Business Mailing Address
C/O WALSH, JOHN PO BOX 640069
315 S. BARBOUR ST BEVERLY HILLS FL 34464
BEVERLY HILLS FL 34465 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		04/08/1982		02/05/1996	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number		Applied For	
23 City & State		28 City & State		NOT APPLICABLE		Not Applicable	
24 Zip		29 Zip		5. Certificate of Status Desired		8.75 Additional Fee Required	
25 Country		30 Country		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

REAVES, JEANET
8 ARIZONA STREET
BEVERLY HILLS FL 32665

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	1.1 TITLE	P
NAME	MIRANDETTE, STEVE	1.2 NAME	MIRANDETTE, STEVE
STREET ADDRESS	507 S JEFFERSON ST	1.3 STREET ADDRESS	507 S JEFFERSON ST
CITY-ST-ZIP	BEVERLY HILLS FL	1.4 CITY-ST-ZIP	BEVERLY HILLS FL
TITLE	VP	2.1 TITLE	
NAME	MIKUTEL, JOHN	2.2 NAME	
STREET ADDRESS	111 W. GOLDENTUFT CT	2.3 STREET ADDRESS	
CITY-ST-ZIP	BEVERLY HILLS FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	D
NAME	PFEIFFER, ED	3.2 NAME	KLAVANS, WALTER
STREET ADDRESS	416 S. ADAMS ST	3.3 STREET ADDRESS	412 W BLUEFLAX CT
CITY-ST-ZIP	BEVERLY HILLS FL	3.4 CITY-ST-ZIP	BEVERLY HILLS FL
TITLE	T	4.1 TITLE	
NAME	LEE, K. T	4.2 NAME	
STREET ADDRESS	952 W. BEAKRUSH LANE	4.3 STREET ADDRESS	
CITY-ST-ZIP	BEVERLY HILLS FL	4.4 CITY-ST-ZIP	
TITLE	S	5.1 TITLE	
NAME	REAVES, JEANET	5.2 NAME	
STREET ADDRESS	8 ARIZONA ST.	5.3 STREET ADDRESS	
CITY-ST-ZIP	BEVERLY HILLS FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	
NAME	BAFFUTO, JOHN	6.2 NAME	
STREET ADDRESS	331 S. BARBOUR ST.	6.3 STREET ADDRESS	
CITY-ST-ZIP	BEVERLY HILLS FL	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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* SIGNATURE *[Signature]* DATE *9/10/97* 350-744 1350

CR2E037 (4/97)