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Apr 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. McPherson Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **768173** (7)

1. Corporation Name

CRESTHAVEN APPLIANCE SERVICE, INC.

Principal Place of Business

Mailing Address

CRESTHAVEN APPL. SERV.
2946-C CROSLY DRIVE, E.
WEST PALM BEACH FL 33415
US

CRESTHAVEN APPL. SERV.
2946-C CROSLY DRIVE, EAST
WEST PALM BEACH FL 33415-0404
US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/27/1983		3a. Date of Last Report 02/26/1996	
21 2885 E. Ashley Drive Suite, Apt. #, etc.		26 2885 E. Ashley Drive Suite, Apt. #, etc.		4. FEI Number 52-2283782		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 West Palm Beach, FL Zip Country		28 West Palm Beach, FL Zip Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 33415		25 Palm Beach		29 33415		30 Palm Beach	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			

RESNICK, MILTON
2717 EMORY DRIVE WEST
WEST PALM BEACH FL 33415

81 Name **WILLIAM JONES**
82 Street Address (P.O. Box Number is Not Acceptable)
2885 East Ashley Drive
83 City
West Palm Beach, FL 85 Zip Code
33415

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 William D. Jones 2-26-97
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	VP/D
NAME	ERMST, DOROTHY	1.2 NAME	ERNST, DOROTHY
STREET ADDRESS	2891 ASHLEY DR W	1.3 STREET ADDRESS	2891 ASHLEY DR, W
CITY-ST-ZIP	WEST PALM BCH, FL 00000	1.4 CITY-ST-ZIP	West Palm Beach, FL 33415
TITLE	SD	2.1 TITLE	D
NAME	RENNERT, FLORE	2.2 NAME	RENNERT, FLORA
STREET ADDRESS	2590 BARKLEY DR, E	2.3 STREET ADDRESS	2590 BARKLEY DR. E.
CITY-ST-ZIP	WEST PALM BCH, FL 00000	2.4 CITY-ST-ZIP	West Palm Beach, FL 33415
TITLE	TD	3.1 TITLE	T/D
NAME	THALER, DOROTHY	3.2 NAME	JONES, WILLIAM
STREET ADDRESS	2551 BARKLEY DR., W.	3.3 STREET ADDRESS	2570-B Barkley Drive East
CITY-ST-ZIP	WEST PALM BCH, FL 00000	3.4 CITY-ST-ZIP	West Palm Beach, FL 33415
TITLE	AST	4.1 TITLE	S/D
NAME	MALKIN, ELEANOR	4.2 NAME	KOEHLER, LOUISE
STREET ADDRESS	2536 EMORY DRIVE EAST	4.3 STREET ADDRESS	5423-F Cresthaven Blvd.
CITY-ST-ZIP	WEST PALM BEACH FL	4.4 CITY-ST-ZIP	West Palm Beach, FL 33415
TITLE	PD	5.1 TITLE	P/D
NAME	RESNICK, MILTON	5.2 NAME	RESNICK, MILTON
STREET ADDRESS	2717 EMORY DRIVE WEST	5.3 STREET ADDRESS	2717-C Emory Drive West
CITY-ST-ZIP	WEST PALM BCH, FL 00000	5.4 CITY-ST-ZIP	West Palm Beach, FL 33415
TITLE		6.1 TITLE	D
NAME		6.2 NAME	DE MOSS, ROBERT
STREET ADDRESS		6.3 STREET ADDRESS	2770-D Ashley Drive East
CITY-ST-ZIP		6.4 CITY-ST-ZIP	West Palm Beach, FL 33415

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 617.0503(3)(b), 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:

William D. Jones
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/4/97 (561) 9120
Date Daytime Phone

0041279

CR2E037 (9/96)