## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

	NL. REPORT Secretary of State  997 DIVISION OF CORPORATIONS		Secretary of State			
DOCUI 1. Corporation	MENT # 82790	06 (9)				
EDEN P	ark <mark>management, i</mark> nc	C.				
Principal Place	e of Business	Maling Address	····		I HERIOT FRINE INDIVIDUAL PRINT OCINO ENH BIN	il Biblit gebel biblit Biblit Tybli 1881
22 HOLLAND AVE ALBANY NY 12209		22 HOLLAND AVE ALBANY NY 12209-1713				
					3. Date Incorporated or Qualified	3a. Date of Last Report
					05/01/1972	01/25/1996
	ace of Business	2a. Maring Address			4. FEI Number	Applied For
Suite, Apt	#, etc	Suite Apt. #, etc.			14-1515566	Not Applicable     <b>\$8.75</b> Additional
22		27	27		5. Certificate of Status Desired	Fee Required
Orty & State	e	City & State	h		6. Election Campaign Financing	\$5.00 May Be
<b>23</b> Ζφ	Country	<b>28</b>	Country		Trust Fund Contribution L  8. This corporation has liability for interest to the corporation of the corporat	Added to Fees
24	25	29	30		Florida Statutes 💢 🗎	/es □ No
	9. Name and Address of Cu	rrent Registered Agent	81	Name	10. Name and Address of New Regis	tered Agent
	E, JOHN					
7300 OLEANDER AVE. PORT ST. LUCIE FL 33452			82	82 Street Address (P.O. Box Number is Not Acceptable)		
			83			
			84	City		85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-r				-named	corporation submits this statement for the pure	FL 65 Zip Code
office or r	egistered agent, or both in the S activities with add account to o	State of Forida, Such change was au Microtions of Section 607,0505, Flor	of the above otherized by side Statutes	the corp	poration's board of directors. I hereby accept the	he appointment as registered
SiGNATURE	The state of the state of the state of	nongrition to the control of the con	Total Dialogo			
	Segret a superior print direct electron detect agent and fille it appropriate. (NOTE Bege			rd signature	required which reinstating)  ADDITIONS/CHANGES TO OFFICER	DATE
12.	V	DELETE	13.			Change Addition
NAME	MCDONALD, JEFF		1.2 NAME	l	D	- A
STREET ADDRESS	22 HOLLAND AVE		1.3 STREET	ADDRESS	Davidoff, Donald Albany, New York 12:	200
CITY - ST - ZiP	ALBANY, NY 00000	The court	1.4 CITY - S	1 ZIP	Albany, New Fork 12.	
THE F	PTD MENDLESON, ALTON P, JI	DELETE R	2.1 TITLE 2.2 NAME		Dirsch. David	Change 🖈 Addition
NAME STREET ADDRESS	22 HOLLAND AVE		2.2 NAME 2.3 STREET ADDRESS		Hirach David Albany, New York	
CITY-S1-20F	ALBANY, NY 00000		2. 4 CHTY-	Ì		
TITLE	CD DELETE		3.1 TITLE			☐ Change ☐ Addition
NAME	HOFFMAN, SCOTT H		3.2 NAME			
STREET ADDRESS	22 HOLLAND AVE ALBANY NY		3.3 STREET			
CITY-ST-ZIP TITLE	V	DELETE	34 CITY-	51 - ZIP		Change Addition
NAME.	KANE, JACK		4 2 NAME			_ • •
STREET ADDRESS	22 HOLLAND AVE		4 3 STREET	ADDRESS		
C TY - ST - 71P	ALBANY, NY 00000	PRIPT	4.4 CITY - 5	ST - ZIP		Obores 14.200
THE	VD GLOCK, ROBERT	DELETE	5 1 TATLE			Change Addition
NAME STREET ADDRESS	22 HOLLAND AVE		5.2 NAME 5.3 STREET	ADDRESS		
CITY - ST- 7IP	ALBANY, NY 00000		5.4 CITY - S			
TITLE	SD	DELETE	6.1 TITLE		·	Change Addition
NAME	SMITH, MORTON		6.2 NAME		<u> </u>	
STREET ADDRESS	11 MARTINE AVE		6.3 STREET	ADDRESS		

14. I do hereby certily 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 of 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 trusted 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:

Jr., Pres.

**FILED** 

Jan 17 1997 8:00am