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Mar 03 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F64522 (8)

1. Corporation Name
SHEMARTONE, INC.

Principal Place of Business
% TROY H MYERS, JR
2033 MAIN STREET, SUITE 600
SARASOTA FL 34237

Mailing Address
% TROY H MYERS, JR
2033 MAIN STREET, SUITE 600
SARASOTA FL 34237-6056



3. Date Incorporated or Qualified 01/25/1982
3a. Date of Last Report 02/22/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		59-2148960		Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired		8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
24 Country		29 Country		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
						Yes No	

9. Name and Address of Current Registered Agent

MYERS, TROY H., JR
2033 MAIN STREET, SUITE 600
SARASOTA FL 34230

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and time if applicable (NOTE: Registered Agent signature required when reinstalling) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D BOLLAM, MARTIN PATRICK	1.1 TITLE	Change Addition
NAME	2033 MAIN ST. #600	1.2 NAME	
STREET ADDRESS	SARATOTA, FL 00000	1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	D ROWBOTHAM, SHIELA	2.1 TITLE	Change Addition
NAME	2033 MAIN ST. #600	2.2 NAME	
STREET ADDRESS	SARATOTA, FL 00000	2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	D BOLLAM, ANTHONY JOHN	3.1 TITLE	Change Addition
NAME	2033 MAIN ST. #600	3.2 NAME	
STREET ADDRESS	SARATOTA, FL 00000	3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	VP MYERS, TROY H	4.1 TITLE	Change Addition
NAME	2033 MAIN ST. #600	4.2 NAME	
STREET ADDRESS	SARATOTA, FL 00000	4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Troy H. Myers, Jr.

Troy H. Myers, Jr. 2/24/97 (941) 953-8110

CR2E034 (9/96)