

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

FILED

May 19 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 # F93000000965 (4)

1. Corporation Name
CRICO OF OCEAN WALK, INC.

Principal Place of Business
11200 ROCKVILLE PIKE
ROCKVILLE MD 20852

Mailing Address
11200 ROCKVILLE PIKE
ROCKVILLE MD 20852-3103



3. Date Incorporated or Qualified
03/12/1993

3a. Date of Last Report
07/30/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	52-1814624	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	<input type="checkbox"/>	
City & State	City & State	6. Election Campaign Financing	\$5.00 May Be Added to Fees
23	28	Trust Fund Contribution	<input type="checkbox"/>
Zip	Zip	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
24	25	29	30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TCD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOCKSER, WILLIAM B	1.2 NAME	
STREET ADDRESS	11200 ROCKVILLE PIKE, 5TH FLOOR	1.3 STREET ADDRESS	
CITY-ST-ZIP	ROCKVILLE MD 20852	1.4 CITY-ST-ZIP	
TITLE	PSD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLOUGHBY, H W	2.2 NAME	
STREET ADDRESS	11200 ROCKVILLE PIKE, 5TH FLOOR	2.3 STREET ADDRESS	
CITY-ST-ZIP	ROCKVILLE MD 20852	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAMPBELL, SUSAN	3.2 NAME	
STREET ADDRESS	11200 ROCKVILLE PIKE, 5TH FLOOR	3.3 STREET ADDRESS	
CITY-ST-ZIP	ROCKVILLE MD	3.4 CITY-ST-ZIP	
TITLE	AS	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JACKSON, ELIJAH L	4.2 NAME	
STREET ADDRESS	11200 ROCKVILLE PIKE, 5TH FLOOR	4.3 STREET ADDRESS	
CITY-ST-ZIP	ROCKVILLE MD 20852	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PALMER, RICHARD J	5.2 NAME	
STREET ADDRESS	11200 ROCKVILLE PIKE, 5TH FLOOR	5.3 STREET ADDRESS	
CITY-ST-ZIP	ROCKVILLE MD 20852	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 of this report, or is an attached or attached address.

SIGNATURE: ELIJAH L JACKSON, ASSISTANT SECRETARY 4/30/97 (30V468-9200)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)