

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **F95000001139 (3)**

1. Corporation Name
293930 ONTARIO LIMITED CORPORATION



Principal Place of Business: **133 CARRYING PLACE TRAIL, R.R. #1 KETTLEBY, ONTARIO LOG 1J0 CA**
Mailing Address: **133 CARRYING PLACE TRAIL, R.R. #1 KETTLEBY, ONTARIO LOG 1J0 CA**

2. Principal Place of Business: **21 SAME**
2a. Mailing Address: **26 SAME**
22. City & State: **27**
23. Zip: **28** Country: **29**

3. Date Incorporated or Qualified: **03/10/1995**
3a. Date of Last Report: **July 1995**
4. FEI Number: **98-0101664**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

**BOCA GRANDE REAL ESTATE, INC.
5700 GULF SHORE DR.
BOCA GRANDE FL 33921**

10. Name and Address of New Registered Agent
81. Name: **SAME AS PREVIOUS.**
82. Street Address (P.O. Box Number is Not Acceptable): **SAME AS PREVIOUS.**
83. City: **FL** 85. Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.07(1) 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, thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.07(1), Florida Statutes.

SIGNATURE

Signature of the Secretary or Director

Signature of the Registered Agent

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	BAIRD, JAMES W	
STREET ADDRESS	133 CARRYING PLACE TRAIL, R.R. #1	
CITY, ST, ZIP	KETTLEBY, ONTARIO CANADA	
TITLE	S	<input type="checkbox"/> DELETE
NAME	BAIRD, IONA	
STREET ADDRESS	133 CARRYING PLACE TRAIL, R.R. #1	
CITY, ST, ZIP	KETTLEBY, ONTARIO CANADA	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information appearing on this filing is correct, true and accurate, and that I am an officer or director of the corporation or the person or persons empowered to execute this report as required by Chapters 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Sandra B. Mordham*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marc V. 1/1995 905-939-2189

CR2E034 (12/95)