

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
 CORPORATION
 ANNUAL REPORT
1996



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

DOCUMENT # F95000003980 (8)

1. Corporation Name
THE NATIONAL HBPA, INC.



Principal Place of Business: **20801 BISCAYNE BLVD #426 AVENTURA FL 33180**
 Mailing Address: **20801 BISCAYNE BLVD #426 AVENTURA FL 33180**

3. Date Incorporated or Qualified: **08/16/1995**
 3a. Date of Last Report

2. Principal Place of Business: **20801 Biscayne Blvd. #426**
 2a. Mailing Address: **20801 Biscayne Blvd. #426**
 21. Suite, Apt. # etc.
 22. City & State
 23. Zip
 24. Country

4. FEI Number: **52-1789171**
 Applied For: Not Applicable
 5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
 6. Election Campaign Financing: **\$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
SAVIN, SCOTT
3757 NE 208 TERRACE
AVENTURA FL 33180

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
 85 Zip Code

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAGAN, ED	1.2 NAME	
STREET ADDRESS	20133 NE BROADWAY CT	1.3 STREET ADDRESS	
CITY - ST - ZIP	TROUTDALE OR 97060	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STIRLING, KENT	2.2 NAME	
STREET ADDRESS	8301 NW 19TH ST	2.3 STREET ADDRESS	
CITY - ST - ZIP	PEMBROKE PINES FL 33024	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HILES, RICK	3.2 NAME	
STREET ADDRESS	4211 SOUTHERN PKWY	3.3 STREET ADDRESS	
CITY - ST - ZIP	LOUISVILLE KY 40214	3.4 CITY - ST - ZIP	
TITLE	P	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOWMAN, MELVYN	4.2 NAME	
STREET ADDRESS	95 W PINE ST	4.3 STREET ADDRESS	
CITY - ST - ZIP	PALMYRA PA 17078	4.4 CITY - ST - ZIP	
TITLE	ST	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAVIN, SCOTT	5.2 NAME	
STREET ADDRESS	3757 NE 208 TERRACE	5.3 STREET ADDRESS	
CITY - ST - ZIP	AVENTURA FL 33180	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	

President
 Bill Webster
 398 Burnett Drive
 Brittonville, AL 36001

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *[Signature]* **5/17/96** **(305) 935-4700**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (3/96)