

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

FILED
May 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000001997 (3)

1. Corporation Name

ANDREW W. BOOTH AND ASSOCIATES, INC.

Principal Place of Business

Mailing Address

1942 NORTHWOOD DRIVE
SALISBURY MD 21801-7824

1942 NORTHWOOD DRIVE
SALISBURY MD 21801-7824



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		04/22/1996	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		52-1301174	
24 Country		29 Country		5. Certificate of Status Desired	
				Applied For	
				Not Applicable	
				6. Election Campaign Financing	
				Trust Fund Contribution	
				7. This corporation owes or has paid the current year Intangible	
				Personal Property Tax due June 30	
				Yes No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CHILDERS, ROY K
5694 SOUCHAK DR.
WEST PALM BEACH FL 33413

81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 City
85 Zip Code

FL

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCD	1.1 TITLE	
NAME	BOOTH, ANDREW W	1.2 NAME	
STREET ADDRESS	8402 HILDA DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	SALISBURY MD	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	
NAME	STUCHLIK IV, CHARLES F	2.2 NAME	
STREET ADDRESS	RD 4 BOX 111A	2.3 STREET ADDRESS	
CITY-ST-ZIP	GEORGETOWN DE	2.4 CITY-ST-ZIP	
TITLE	STD	3.1 TITLE	
NAME	SHAHAN, JOHN R	3.2 NAME	
STREET ADDRESS	3424 RESIDENTIAL DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	ALLEN MD	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	HERMAN, KENNETH R	4.2 NAME	
STREET ADDRESS	1138 NEVINS PLACE	4.3 STREET ADDRESS	
CITY-ST-ZIP	SALISBURY MD	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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:

Andrew W. Booth

21 Ann. 98 4/10/98-7299

CP2E034 (10/97)