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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000002385 (0)
 1. Corporation Name
INVENTURE PLACE, INC.



Principal Place of Business 221 S. BROADWAY AKRON OH 44308	Mailing Address 221 S. BROADWAY AKRON OH 44308-1505
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3. Date Incorporated or Qualified 05/13/1996	3a. Date of Last Report
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29
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4. FEI Number 34-1580038	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 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 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

TITLE	P <input checked="" type="checkbox"/> DELETE
NAME	BRAND, STEPHEN S *SEE ATTACHED LIST OF BOARD MEMBERS
STREET ADDRESS	221 S. BROADWAY
CITY-ST-ZIP	AKRON OH 44308
TITLE	V <input type="checkbox"/> DELETE
NAME	BRIGGS, ROBERT W
STREET ADDRESS	221 S. BROADWAY
CITY-ST-ZIP	AKRON OH 44308
TITLE	T <input checked="" type="checkbox"/> DELETE
NAME	HEH, RAYMOND E
STREET ADDRESS	221 S. BROADWAY
CITY-ST-ZIP	AKRON OH 44308
TITLE	D <input type="checkbox"/> DELETE
NAME	BROWN, JEANETTE G PHD
STREET ADDRESS	150 GREENTREE RD.
CITY-ST-ZIP	CHAGRIN FALLS OH 44022
TITLE	D <input type="checkbox"/> DELETE
NAME	DAVIS, TIMOTHY W
STREET ADDRESS	175 S. MAIN ST.
CITY-ST-ZIP	AKRON OH 44308
TITLE	D <input type="checkbox"/> DELETE
NAME	DURANT, GRAHAM J PHD
STREET ADDRESS	1 KINDALL SQUARE, #700
CITY-ST-ZIP	CAMBRIDGE MA 02139

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	RICHARD G. NICHOLS
1.3 STREET ADDRESS	221 S. BROADWAY STREET
1.4 CITY-ST-ZIP	AKRON, OHIO 44308
2.1 TITLE	DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	SECRETARY / TREASURER <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	WILLIAM E. WALKER
3.3 STREET ADDRESS	221 S. BROADWAY STREET
3.4 CITY-ST-ZIP	AKRON, OHIO 44308
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Richard G. Nichols (202) 810 1880

CR2E037 (9/96)

INVENTURE PLACE, INC.

**INVENTURE PLACE
BOARD OF TRUSTEES**

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*denotes member of Executive Committee
4/21/97