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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

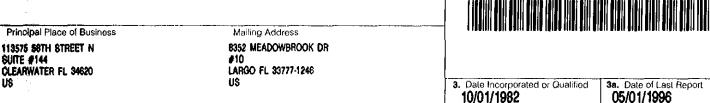
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G04935

ALFRED HAMILTON & ASSOCIATES, INC.

FILED									
Apr 21 1997 8:00am									
Secretary of State									



							Ι.	10/01/1982	05/01/1996			
2. Principal Plac	e of Business	2a. M	ailing Address				4.	FEI Number		Ţ	Applied For	
:1		26						59-2233335			Not Applicable	
Sulte, Apt. #,	etc. 145	27 St	Suite, Apl. #, etc.				5.	Certificate of Status Desired	See Required			
City & State		28 Ci	ly & State				6.	Election Campaign Financing Trust Fund Contribution			.00 May Be ded to Fees	
Zip 4]	Country 25	29 29	Zip Country 30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes					
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent							
BROWDER, DAVID, JR. 300 S. DUNCAN AVE.,STE. 101 CLEARWATER FL 33515					1	Name						
					2	Street Address (P.O. Box Number is Not Acceptable)						
				8:	3							
				84	4	City			FL	85	Zip Code	

11. Pursuant to the provisions of Soctions 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 agont and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6) PID DELETE Change Addition TITLE 1.1 TITLE HAMILTON, ALFRED A. NAME 1.2 NAME 8352 MEADOWBROOK DR #10 STREET ADDRESS 1.3 STREET ADDRESS LARGO FL CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change Addition TITLE 2.1 TITLE HAMILTON, DOROTHY M. NAME 2.2 NAME 8352 MEDOWBROOK DR #10 STREET ADDRESS 23 STREET ADDRESS LARGO FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addilion TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP Change DELETE TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TALE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 62 NAME

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 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

STREET ADDRESS