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Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # G19358 (2)

1. Corporation Name
ALBERS & ASSOCIATES, INC.



Principal Place of Business: % JEAN K. ALBERS, 620 CROWN OAK CENTRE DR, LONGWOOD FL 32750
Mailing Address: % JEAN K. ALBERS, 620 CROWN OAK CENTRE DR, LONGWOOD FL 32750-6188

3. Date Incorporated or Qualified: 01/19/1983
3a. Date of Last Report: 04/11/1996

2. Principal Place of Business: 21 1026 ORANGE GROVE LANE, 22 APOPKA FLORIDA, 23 32712-2141, 24 U.S.A.
2b. Mailing Address: 26 1026 ORANGE GROVE LANE, 27 APOPKA FLORIDA, 28 32712-2141, 29 U.S.A.

4. FEI Number: 59-2258722
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: [X] Yes [] No

9. Name and Address of Current Registered Agent: ALBERS, JEAN K., 620 CROWN OAK CENTRE DR, LONGWOOD FL 32750

10. Name and Address of New Registered Agent: 81 Name: SAME, 82 Street Address: 1026 ORANGE GROVE LANE, 84 City: APOPKA, FL, 85 Zip Code: 32712-2141

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: Jean K. Albers (address change only), DATE: 3/21/97

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes entries for PD ALBERS, THOMAS G. and STD ALBERS, JEAN K.

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes entries for 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP (32712-2141).

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.

SIGNATURE: Jean K. Albers, DATE: 3/21/97, (407) 880-4401

CR2E034 (9/96)