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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # G46108

1. Corporat on Name

(8)

AGINCOURT PLACE, INC.

FILED
May 09 1997 8:00am
Secretary of State

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	of Business	Mailing Address		CAMPACITA MALL MAIN MINE STATE WHICH CHAIN		
2710 2ND STREI NDIAN ROCKS	ET BEACH FL 34635	52 DENNETT DRIVE AGINCOURT, ONTARIO M18	3 2E7			
		CANADA		3. Date Incorporated or Qualified 06/24/1983	3a. Date of Last Repo 05/01/1996	ort
2. Principal Pt	ace of Business	2a. Mailing Address	2	4 FEI Number		ed For
1		26 61 KAKE	UIEW DR	59-2300498	Not A	pplicabl
Suite, Apt i		Suite, Apt. #, etc.		5. Certificate of Status Desired	SB.75 Add	
City & State)	City & State PERRY	ONT.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Ma Added to 8	
Zιρ	Country	Zip L9L 14/	Country	8. This corporation has liability for		99.032,
4	9. Name and Address of Curre		30 CANAD	Florida Statutes 10. Name and Address of New R	Yes No	
DEL C		ant Dagistered Agent	B1 Name		Bistolen väsit	
	DACH, DENNIS R JR.	1 . 2000	1,100	SAME		
004U	SEMINOLE BLVD. P.O. B	0x 3390	82 Street	Address (P.O. Box Number is Not Accepta	UD PO.Box	339
SEMI	NOLE FL 34645 34642				1 1 100%	24.
	_		84 City	MINOLE FL	les l 7:a Ca	
			84 City		FL 85 2000	°42.
I1. Pursuant t	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the above-named	corporation submits this statement for the	purpose of changing its re	egistere
office or re agent I ar	egistered agent, or both, in the Stat m familiar with, and accept the obli	le of Florida. Such change was at gations of, Section 607.0505. Flor	uthorized by the cor rida Statutes.	poration's board of directors. I hereby acce	pt the appointment as req	gistered
CALABI IDE	DENVIS R.	DELOACH JA	}	APRIZ	24/97	
IGNATION:	Signature, typical or printed name of registered a					
	eng it at the a punited that the roll around the	gent and title if applicable. (NOTE	Registered Agent signatur	e required when reinstating)	DATE	
2.	OFFICERS AI	ND DIRECTORS	13.	e required when reinstating) ADDITIONS/CHANGES TO OFFI		
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0/3(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.

THE ON MET THE WANTED WATER OF BUILDING OF PROPERTY.

Dale Daytime Phone # 1 - 905 - 185 2/94/0528445