

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

FILED
Jan 29 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # H01360
1. Corporation Name
COCONUT CODE, INC.

(7)



DO NOT WRITE IN THIS SPACE

Principal Place of Business 1430 S FEDERAL HWY. SUITE 302 DEARFILED BEACH FL 33441		Mailing Address 1430 S FEDERAL HWY. SUITE 302 DEARFILED BEACH FL 33441	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 04/30/1984		4. FEI Number 59-2556411	
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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent WOTELL, CHRISTOPHER L. 1191 SW 17TH ST. BOCA RATON FL 33486		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	DIRECTOR
NAME	WOTELL, MATTHEW J.	1.2 NAME	J. KENNETH GULDEN
STREET ADDRESS	1191 SW 17TH ST.	1.3 STREET ADDRESS	641 SW 16TH STREET
CITY - ST - ZIP	BOCA RATON FL	1.4 CITY - ST - ZIP	BOCA RATON, FL 33486
TITLE	STD	2.1 TITLE	VPE CHIEF FINANCIAL OFFICER
NAME	WOTELL, CHRISTOPHER L.	2.2 NAME	DANIEL W. REESE
STREET ADDRESS	1193 SW 19TH STREET	2.3 STREET ADDRESS	9761 NW 14TH STREET
CITY - ST - ZIP	BOCA RATON FL	2.4 CITY - ST - ZIP	PLANTATION, FL 33322
TITLE	V	3.1 TITLE	
NAME	WOTELL, CLEMENT E.	3.2 NAME	
STREET ADDRESS	1299 SW WALNUT TERRACE	3.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL	3.4 CITY - ST - ZIP	
TITLE	PD	4.1 TITLE	
NAME	WOTELL, MARK E.	4.2 NAME	
STREET ADDRESS	1150 SW 17TH STREET	4.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL	4.4 CITY - ST - ZIP	
TITLE	VD	5.1 TITLE	
NAME	WOTELL, EUGENE J.	5.2 NAME	
STREET ADDRESS	1191 SW 17TH STREET	5.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL	5.4 CITY - ST - ZIP	
TITLE	CD	6.1 TITLE	
NAME	ABDO, JOHN E	6.2 NAME	
STREET ADDRESS	1350 NE 58TH STREET	6.3 STREET ADDRESS	
CITY - ST - ZIP	FT. LAUDERDALE FL 33334	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.

CR2E034 (10/97)