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Jan 23 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # J36776 (9)

1. Corporation Name  
FOOTE SQUARED DEVELOPMENT, INC.

Principal Place of Business  
1219 RAILROAD AVENUE  
STUART FL 34994  
US

Mailing Address  
3734 POMPANO DRIVE  
PALM CITY FL 34980-3820



3. Date Incorporated or Qualified 10/03/1986  
3a. Date of Last Report 03/20/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26 P.O. Box 1131		59-2743674		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		Trust Fund Contribution		<input type="checkbox"/>	
23		28 Palm City, FL		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Zip		Zip					
24		29 34991		30 USA			
Country		Country					
25		30					

9. Name and Address of Current Registered Agent

FOOTE, CHARLES MICHAEL  
3734 POMPANO DRIVE  
PALM CITY FL 34990

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 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 agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	FOOTE, CHARLES MICHAEL	1.2 NAME	
STREET ADDRESS	3734 POMPANO DRIVE	1.3 STREET ADDRESS	
CITY - ST - ZIP	PALM CITY FL	1.4 CITY - ST - ZIP	
TITLE	VP	2.1 TITLE	
NAME	RUDDY, ROBERTS J.	2.2 NAME	
STREET ADDRESS	6141 SE RIVERBOAT DR.	2.3 STREET ADDRESS	
CITY - ST - ZIP	STUART FL	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 in an attachment with an address.

SIGNATURE: C Michael Foote

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/97 561-288-6633

Date

Daytime Phone

CR2E034 (9/96)