

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

FILED
May 02 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 # J88551 (3)
 1. Corporation Name
COMMUNIQUE COMPANY



Principal Place of Business: **7135 TANGLEWOOD DRIVE NEW PORT RICHEY FL 34654**
 Mailing Address: **7135 TANGLEWOOD DRIVE NEW PORT RICHEY FL 34654-5721**

3. Date Incorporated or Qualified: **08/19/1987**
 3a. Date of Last Report: **05/01/1996**

21	2. Principal Place of Business	26	2a. Mailing Address	4.	FBI Number	Applied For				
	Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-2835784	Not Applicable				
22	22. City & State	27	27. City & State	5.	Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required				
23	23. City & State	28	28. City & State	6.	Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees				
24	24. Zip	25	25. Country	29	29. Zip	30	30. Country	8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
DORR, STEVE 7135 TANGLEWOOD DRIVE NEW PORT RICHEY FL 34654				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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: _____ (NOT: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	DORR, STEVE			1.2 NAME			
STREET ADDRESS	7135 TANGLEWOOD DRIVE			1.3 STREET ADDRESS			
CITY-ST-ZIP	NEW PORT RICHEY FL			1.4 CITY-ST-ZIP			
TITLE	T	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	DORR, MARY A.			2.2 NAME			
STREET ADDRESS	7135 TANGLEWOOD DRIVE			2.3 STREET ADDRESS			
CITY-ST-ZIP	NEW PORT RICHEY FL			2.4 CITY-ST-ZIP			
TITLE	V	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	AZELTINE, JOHN H.			3.2 NAME			
STREET ADDRESS	2916 DEER RUN S.			3.3 STREET ADDRESS			
CITY-ST-ZIP	CLEARWATER FL			3.4 CITY-ST-ZIP			
TITLE	V	<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	AZELTINE, BARBARA J.			4.2 NAME			
STREET ADDRESS	2916 DEER RUN S.			4.3 STREET ADDRESS			
CITY-ST-ZIP	CLEARWATER FL			4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
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 as an attachment with an address.

SIGNATURE: *[Signature]* **Steve Dorr** President 4-7-97

CR2E034 (9/96)