


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

FILED
Jan 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **J99976**

(9)

1. Corporation Name
RICOU PROPERTIES, INC.



Principal Place of Business
**1979 N.E. RICON TERRACE
SUITE 200
JENSEN BEACH FL 34957
US**

Mailing Address
**PINEAPPLE SQUARE SHOPPERS
1979 RICON TERRACE
JENSEN BEACH FL 34957
US**

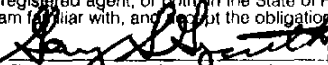
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1979 N.E. RICON TERRACE Suite, Apt. #, etc. 22 City & State 23 JENSEN BEACH FLORIDA Zip 24 34957 Country 25 US	2a. Mailing Address 26 1979 RICON TERRACE Suite, Apt. #, etc. 27 City & State 28 JENSEN BEACH, FL Zip 29 34957 Country 30 US
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3. Date Incorporated or Qualified 11/02/1987	4. FEI Number 65-0141160	Applied For <input type="checkbox"/> Not Applicable
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	7. 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

8. Name and Address of Current Registered Agent GYARMATHY, GARY S 1979 N.E. RICON TERRACE 1800 SOUTH FEDERAL HIGHWAY JENSEN BEACH FL 34957	10. Name and Address of New Registered Agent 81 Name GYARMATHY, GARY S. 82 Street Address (P.O. Box Number is Not Acceptable) 1979 N.E. RICON TERRACE 83 84 City JENSEN BEACH FL 85 Zip Code 34957
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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  **GARY S. GYAEMATHY P.T.D.** DATE **1-6-98**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GYARMATHY, GARY S	1.2 NAME	
STREET ADDRESS	4786 S.W. BIMINI CIR S	1.3 STREET ADDRESS	
CITY-ST-ZIP	PALM CITY FL	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GONANO, DOUGLAS E	2.2 NAME	
STREET ADDRESS	1800 S FEDERAL HWY #200	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. PIERCE FL	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARRELL, DANIEL B	3.2 NAME	
STREET ADDRESS	1800 S. FEDERAL HWY, #200	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT. PIERCE FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PIOWATY, JAMES W	4.2 NAME	
STREET ADDRESS	8005 S INDIAN RIVER DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT PIERCE FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIROIS, PATRICIA	5.2 NAME	
STREET ADDRESS	1805 THUMB POINT	5.3 STREET ADDRESS	
CITY-ST-ZIP	FT PIERCE FL	5.4 CITY-ST-ZIP	
TITLE		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 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  **GARY S. GYAEMATHY P.T.D.** DATE **1-6-98** **54-225-6003**

CR2E034 (10/97)