

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

FILED

Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K08738 (2)
 1. Corporation Name
ERICKSEN COMMUNITIES, INC.

Principal Place of Business 6318 TRAIL BLVD. NORTH NAPLES FL 34108-34108	Mailing Address 6318 TRAIL BLVD. NORTH NAPLES FL 34108-2890
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/21/1987	3a. Date of Last Report 05/01/1996
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 65-0020379		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip 34108 Country	28 Zip Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24	25	29		30	
8. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

ERICKSEN, GROVER G.
6318 TRAIL BLVD
NAPLES FL 34108

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL 34108
83	
84 City	

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	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	PST	ERICKSEN, GROVER G.	6318 TRAIL BLVD. N. NAPLES FL				
	D	ERICKSEN, GROVER G.	6318 TRAIL BLVD. N. NAPLES FL				
	VP	ERICKSEN, DAVID C	6318 TRAIL BLVD. N. NAPLES FL				
	VP	GRABNER, JR. R H	6318 TRAIL BLVD. N. NAPLES FL				
	VP	LENNON, TIMOTHY J	6318 TRAIL BLVD. N. NAPLES FL				
	VP	DUCKWORTH, STEPHEN M	6318 TRAIL BLVD. N. NAPLES FL				

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0413614

Grover G. Ericksen 04/23/97 (941)566-3355

CR2E034 (9/96)