


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

FILED
Feb 03 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 # **K37352** (7)
1. Corporation Name
CRANE'S LANDING PARTNERS, INC.



Principal Place of Business 200 S. ORANGE AVE STE 2800 ORLANDO FL 32801 US	Mailing Address 200 S. ORANGE AVE STE 2800 ORLANDO FL 32801 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country		3. Date Incorporated or Qualified 10/07/1988	
21		25		4. FEI Number 59-2912962	
22		26		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24		28		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**MORGAN, ULTIMA D.
315 EAST ROBINSON STREET
SUITE 800
ORLANDO FL 32801**

10. Name and Address of New Registered Agent

81 Name	JOHN G. ARIKO, JR
82 Street Address (P.O. Box Number is Not Acceptable)	200 S. ORANGE AVE STE 2800
83	
84 City	ORLANDO
85 Zip Code	FL 32801

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

John G. Ariko, Jr.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/6/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARIKO, JOHN G.	1.2 NAME	
STREET ADDRESS	200 S. ORANGE AVE STE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DVT	2.2 NAME	
STREET ADDRESS	FLOOD, ROBERT	2.3 STREET ADDRESS	
CITY-ST-ZIP	9 LINKS PASSAGE	2.4 CITY-ST-ZIP	
	WESTERLY FL		
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DVS	3.2 NAME	
STREET ADDRESS	MORGAN, JOHN B.	3.3 STREET ADDRESS	
CITY-ST-ZIP	20 N. ORANGE AVE #1807	3.4 CITY-ST-ZIP	
	ORLANDO FL		
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		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 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

John G. Ariko, Jr.

1/6/98

407-1125-2552

CR2E034 (10/97)