

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **K37368**
1. Corporation Name
AVANTI PROPERTY CORPORATION

(3) *OK to pay my*



Principal Place of Business: % CHARLES SCHWARTZ, 431 EAST HORATIO AVENUE, SUITE 210, MAITLAND FL 32751
Mailing Address: % CHARLES SCHWARTZ, 431 EAST HORATIO AVENUE, SUITE 210, MAITLAND FL 32751

3. Date Incorporated or Qualified: 10/07/1988
3a. Date of Last Report: 04/07/1995
4. FEI Number: 59-2919842
5. Certificate of Status Desired: Applied for, Not Applicable
6. Election Campaign Financing / Trust Fund Contribution: \$8.75 Additional Fee Required, \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes, No

2. Principal Place of Business (21-24): Suite, Apt. #, etc.; City & State; Zip; Country
2a. Mailing Address (26-29): Suite, Apt. #, etc.; City & State; Zip; Country

9. Name and Address of Current Registered Agent: SCHWARTZ, CHARLES, 431 EAST HORATIO AVENUE, SUITE 210, MAITLAND FL 32751
10. Name and Address of New Registered Agent (81-84): Name; Street Address (P.O. Box Number is Not Acceptable); City; 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: Signatures, typed or printed names of registered agent and directors are required. (NOTE: Registered Agent signature required when changing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHWARTZ, CHARLES	1.2 NAME	
STREET ADDRESS	431 E HORATIO AVE., #21	1.3 STREET ADDRESS	
CITY-STATE-ZIP	MAITLAND FL	1.4 CITY-STATE-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOEB, DONALD E.	2.2 NAME	
STREET ADDRESS	22 ST CLAIR AVE, E, 1700	2.3 STREET ADDRESS	
CITY-STATE-ZIP	TORONTO, ONT., CANADA	2.4 CITY-STATE-ZIP	
TITLE	ST	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SCHMIDT, DIANE G.	3.2 NAME	
STREET ADDRESS	431 E. HORATIO AVE #210	3.3 STREET ADDRESS	
CITY-STATE-ZIP	MAITLAND FL	3.4 CITY-STATE-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

ST CHILDRESS, JANET
431 E. Horatio Ave, #210
Maitland, FL 32751

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Charles Schwartz* Charles Schwartz, Pres. 4/3/96 407/628-8488
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)