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Mar 13 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 # K38302

(1)

1. Corporation Name:

TFM OF FT. MYERS BEACH, INC.



Principal Place of Business

C/O RICHARD T. COTTER
6100 ESTERO BLVD.
FT. MYERS BEACH FL 33931

Mailing Address

C/O RICHARD T. COTTER
6100 ESTERO BLVD.
FT. MYERS BEACH FL 33931-4347

3. Date Incorporated or Qualified 10/12/1988	3a. Date of Last Report 04/22/1996
4. FEI Number 28-4282183	Applied For 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24. Country

29. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COTTER, RICHARD T.
6100 ESTERO BLVD.
FT. MYERS BEACH FL 33931

81. Name
THOMAS F MYERS
82. Street Address (P.O. Box Number is Not Acceptable)
1113 ESTERO BLVD.
83. FT MYERS BEACH, FL 33931-2551
84. City FL 85. 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 and agree to comply with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *Thomas F Myers* THOMAS F MYERS V.P. 2/20/97
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COTTER, RICHARD T.	1.2 NAME	
STREET ADDRESS	6100 ESTERO BLVD.	1.3 STREET ADDRESS	
CITY, ST, ZIP	FT. MYERS BEACH FL	1.4 CITY - ST - ZIP	
TITLE	VTS	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MYERS, THOMAS F.	2.2 NAME	
STREET ADDRESS	21461 WIDGEON TERR	2.3 STREET ADDRESS	
CITY, ST, ZIP	FT. MYERS BCH FL	2.4 CITY - ST - ZIP	
TITLE	P	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MYERS, FRANCES P.	3.2 NAME	
STREET ADDRESS	21461 WIDGEON TERR	3.3 STREET ADDRESS	
CITY, ST, ZIP	FT. MYERS BCH FL	3.4 CITY - ST - ZIP	
TITLE		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		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		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 included 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: *Thomas F Myers* THOMAS F MYERS V.P. 2/20/97
DATE