

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

FILED  
May 05 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 # K38842 (6)  
1. Corporation Name  
DAY PARK ASSOCIATES, INC.

Principal Place of Business 1320 OLD CHAIN BR RD. #435 MC LEAN VA 22101	Mailing Address 1320 OLD CHAIN BR RD. #435 MC LEAN VA 22101
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/13/1988		3a. Date of Last Report 03/29/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 59-2919132		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		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent STEINBACH 44 COCOANUT ROW SUITE T-10 PALM BEACH FL 33490				10. Name and Address of New Registered Agent 81 Name W AYLE KAYLY 82 Street Address P.O. Box Number is Not Acceptable C/O TANGLEWOOD 4724004 83 1060 US Hwy 1 SW #2 84 City Vero Beach FL 32962			
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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:  DATE: 4/22/97

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	NAME	ALCORN, MICHAEL J.	1.1 TITLE		Change	Addition
STREET ADDRESS			1320 OLD CHAIN BR RD #435	1.2 NAME			
CITY - ST - ZIP			MCLEAN VA 22101	1.3 STREET ADDRESS			
TITLE	DST	NAME	YAWITT, ROBERT A.	1.4 CITY - ST - ZIP			
STREET ADDRESS			1320 OLD CHAIN BR RD #435	2.1 TITLE		Change	Addition
CITY - ST - ZIP			MCLEAN VA 22101	2.2 NAME			
TITLE	DP	NAME	YOUNG, DONALD D.	2.3 STREET ADDRESS			
STREET ADDRESS			1320 OLD CHAIN BR RD #435	2.4 CITY - ST - ZIP			
CITY - ST - ZIP			MCLEAN VA 22101	3.1 TITLE		Change	Addition
TITLE	D	NAME	DEVINE, JAMES A.	3.2 NAME			
STREET ADDRESS			1320 OLD CHAIN BR RD #435	3.3 STREET ADDRESS			
CITY - ST - ZIP			MCLEAN VA 22101	3.4 CITY - ST - ZIP			
TITLE		NAME		4.1 TITLE		Change	Addition
STREET ADDRESS				4.2 NAME			
CITY - ST - ZIP				4.3 STREET ADDRESS			
TITLE		NAME		4.4 CITY - ST - ZIP			
STREET ADDRESS				5.1 TITLE		Change	Addition
CITY - ST - ZIP				5.2 NAME			
TITLE		NAME		5.3 STREET ADDRESS			
STREET ADDRESS				5.4 CITY - ST - ZIP			
CITY - ST - ZIP				6.1 TITLE		Change	Addition
TITLE		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 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:  DATE: 4/22/97

CR2E034 (9/96)