

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

FILED

**May 01 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 # K45305 (5)

1. Corporation Name
ROZIER MANAGEMENT COMPANY



Principal Place of Business 84 DAVIS BLVD. TAMPA FL 33606	Mailing Address 84 DAVIS BLVD. TAMPA FL 33606
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3. Date Incorporated or Qualified 11/15/1988	3a. Date of Last Report 02/01/1996
4. FEI Number 59-2921754	Applied For <input type="checkbox"/> 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 checked="" 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	29

9. Name and Address of Current Registered Agent

**WINTER, JACK W.
84 DAVIS BLVD.
TAMPA FL 33606**

10. Name and Address of New Registered Agent

81 Name JEANNE R. WINTER
82 Street Address (P.O. Box Number is Not Acceptable) 84 DAVIS BLVD, Apt 700
83
84 City TAMPA FL 85 Zip Code 33606

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 *Jeanne R. Winter* **PRESIDENT** **4/23/97**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE DP	<input checked="" type="checkbox"/> DELETE
NAME WINTER, JACK W.	
STREET ADDRESS 84 DAVIS BLVD	
CITY-ST-ZIP TAMPA FL	
TITLE ST	<input checked="" type="checkbox"/> DELETE
NAME WINTER, JACK W.	
STREET ADDRESS 84 DAVIS BLVD	
CITY-ST-ZIP TAMPA FL	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE Off, PRES, SEC, TREAS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME JEANNE R. WINTER	
3.3 STREET ADDRESS 84 DAVIS BLVD	
3.4 CITY-ST-ZIP TAMPA, FL 33606	
4.1 TITLE Off, VICE PRES	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME MALCOLM C. HARRIS	
4.3 STREET ADDRESS 3621 BEACH DRIVE	
4.4 CITY-ST-ZIP TAMPA FL 33629	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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: *Jeanne R. Winter* **JEANNE R. WINTER** **4/23/97** **(813)251-6473**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #

CR2E034 (9/96)