

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

**FILED**  
**May 07 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 # K46955 (6)**  
 1. Corporation Name: **CEA INVESTORS VI, INC.**



Principal Place of Business: **101 EAST KENNEDY BLVD. SUITE 3300 TAMPA FL 33602**  
 Mailing Address: **101 EAST KENNEDY BLVD. SUITE 3300 TAMPA FL 33602-5151**

2. Principal Place of Business: 21 [ ] Suite, Apt. #, etc. 22 [ ] City & State 23 [ ] Zip Country 24 [ ] 25 [ ]  
 2a. Mailing Address: 26 [ ] Suite, Apt. #, etc. 27 [ ] City & State 28 [ ] Zip Country 29 [ ] 30 [ ]

3. Date Incorporated or Qualified: **11/15/1988** 3a. Date of Last Report: **05/01/1996**  
 4. FEI Number: **65-0083456** Applied For Not Applicable  
 5. Certificate of Status Desired: [ ] **\$8.75 Additional Fee Required**  
 6. Election Campaign Financing Trust Fund Contribution: [ ] **\$5.00 May Be Added to Fees**  
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: [ ] Yes [ ] No  
 10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent  
**CARDY, THOMAS W.  
 101 EAST KENNEDY BLVD  
 SUITE 3300  
 TAMPA FL 33602**

81 Name: **George Pollock, Jr.**  
 82 Street Address (P.O. Box Number is Not Acceptable): **101 E. Kennedy Blvd., Suite 3300**  
 83 [ ]  
 84 City: **Tampa** FL 85 Zip Code: **33602**

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: *George Pollock Jr.*

12. OFFICERS AND DIRECTORS

TITLE	<b>DP</b>	<input type="checkbox"/> DELETE
NAME	<b>MICHAELS, J. PATRICK, JR</b>	
STREET ADDRESS	<b>101 E KENNEDY BLVD #3300</b>	
CITY-ST-ZIP	<b>TAMPA FL</b>	
TITLE	<b>S</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>GAWTHROP, H. GENE</b>	
STREET ADDRESS	<b>101 E KENNEDY BLVD #3300</b>	
CITY-ST-ZIP	<b>TAMPA FL</b>	
TITLE	<b>T</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>CARDY, THOMAS W.</b>	
STREET ADDRESS	<b>101 E KENNEDY BLVD #3300</b>	
CITY-ST-ZIP	<b>TAMPA FL</b>	
TITLE	<b>T</b>	<input type="checkbox"/> DELETE
NAME	<b>GORDON, BRAD A</b>	
STREET ADDRESS	<b>101 E. KENNEDY BLVD., STE. 3300</b>	
CITY-ST-ZIP	<b>TAMPA FL</b>	
TITLE	<b>VS</b>	<input type="checkbox"/> DELETE
NAME	<b>POLLOCK, GEORGE A JR.</b>	
STREET ADDRESS	<b>101 E. KENNEDY BLVD., STE. 3300</b>	
CITY-ST-ZIP	<b>TAMPA FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	<b>SVP</b>
23 STREET ADDRESS	<b>BUENS, DAVIDA.</b>
24 CITY-ST-ZIP	<b>101 E. KENNEDY BLVD., SUITE 3300</b>
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	<b>TAMPA, FLA 33602</b>
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied will not qualify for the exemption stated in Section 119.07(3)(b), 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: *George Pollock Jr.*

CR2E034 (9/96)