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Jan 21 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 # K54850 (8)

1. Corporation Name  
JAMES A. RISING, INC.



Principal Place of Business: % JAMES A. RISING, 801-49TH ST S, GULF PORT FL 33707  
Mailing Address: % JAMES A. RISING, 801-49TH ST S, GULF PORT FL 33707-2635

3. Date Incorporated or Qualified: 12/30/1988  
3a. Date of Last Report: 01/22/1996  
4. FEI Number: 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: [x] Yes [ ] No

2. Principal Place of Business: 21, 22, 23, 24  
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent  
RISING, JAMES A.  
801 - 49TH ST S  
ST. PETERSBURG FL 33707

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		DELETED
TITLE	PST	[ ] DELETE
NAME	RISING, JAMES A.	
STREET ADDRESS	801 - 49TH ST S	
CITY - ST - ZIP	ST PETERSBURG FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE		[ ] Change	[ ] Addition
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY - ST - ZIP			
2.1 TITLE		[ ] Change	[ ] Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY - ST - ZIP			
3.1 TITLE		[ ] Change	[ ] Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP			
4.1 TITLE		[ ] Change	[ ] Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP			
5.1 TITLE		[ ] Change	[ ] Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			
6.1 TITLE		[ ] Change	[ ] 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, unchanged, or on an attachment, with an address.

SIGNATURE: James A. Rising  
DATE: 01/05/97  
DAYTIME PHONE #: 813-327-8411

CR2E034 (9/96)