


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

FILED  
Jan 27 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>				<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS																																																																																																																																																	
<b>DOCUMENT # K54952 (2)</b> 1. Corporation Name <b>MARKHAM ENTERPRISES, INC.</b>																																																																																																																																																					
Principal Place of Business <b>7101 PRESIDENTS DR. #205 ORLANDO FL 32809 US</b>			Mailing Address <b>7101 PRESIDENTS DR. #205 ORLANDO FL 32809-5687 US</b>																																																																																																																																																		
<b>21</b> 2. Principal Place of Business Suite, Apt. #, etc.		<b>2a</b> 2a. Mailing Address Suite Apt #, etc.		<b>3</b> 3. Date Incorporated or Qualified <b>12/30/1988</b>																																																																																																																																																	
<b>22</b> City & State City State		<b>2b</b> 2b. Mailing Address City & State		<b>3a</b> 3a. Date of Last Report <b>05/01/1996</b>																																																																																																																																																	
<b>23</b> Zip Country Zip Country		<b>2c</b> 2c. Mailing Address Zip Country		<b>4</b> 4. FEI Number <b>59-2935328</b>																																																																																																																																																	
<b>24</b> 24. Name and Address of Current Registered Agent <b>MARKHAM, JOHN J. 500 E CONCORD ST ORLANDO FL 32803</b>		<b>25</b> 25. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		<b>5</b> 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required <b>6</b> 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees <b>8</b> 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																																																																																																																																	
<b>11</b> 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 _____																																																																																																																																																					
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<b>14</b> 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:

*Daniel P. Markham*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-97 407-859-9300

Date Daytime Phone #

0089561

CR2E034 (9/96)