


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

FILED

Apr 28 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 # K68729 (8)					
1. Corporation Name SCOTT DESIGNS, INC.					
Principal Place of Business C/O DIANE DRAKE P O BOX 5698 SARASOTA FL 34277-2698			Mailing Address C/O DIANE DRAKE P O BOX 5698 SARASOTA FL 34277-2698		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 02/24/1989 3a. Date of Last Report 07/24/1996 4. FEI Number 65-0107561 5. Certificate of Status Desired <input type="checkbox"/> 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> 7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent DRAKE, J. KEVIN 1343 MAIN STREET, SUITE 204 SARASOTA FL 34236				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 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 <i>[Signature]</i> DATE 4/21/97					
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
12.1 NAME DRAKE, DIANE L. 12.2 STREET ADDRESS 1888 BOYCE STREET 12.3 CITY-ST-ZIP SARASOTA FL			13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-ZIP		
12.4 NAME DRAKE, J. KEVIN 12.5 STREET ADDRESS 1343 MAIN ST, SUITE 204 12.6 CITY-ST-ZIP SARASOTA FL			13.5 TITLE 13.6 NAME 13.7 STREET ADDRESS 13.8 CITY-ST-ZIP		
12.7 NAME 12.8 STREET ADDRESS 12.9 CITY-ST-ZIP			13.9 TITLE 13.10 NAME 13.11 STREET ADDRESS 13.12 CITY-ST-ZIP		
12.10 NAME 12.11 STREET ADDRESS 12.12 CITY-ST-ZIP			13.13 TITLE 13.14 NAME 13.15 STREET ADDRESS 13.16 CITY-ST-ZIP		
12.13 NAME 12.14 STREET ADDRESS 12.15 CITY-ST-ZIP			13.17 TITLE 13.18 NAME 13.19 STREET ADDRESS 13.20 CITY-ST-ZIP		
12.16 NAME 12.17 STREET ADDRESS 12.18 CITY-ST-ZIP			13.21 TITLE 13.22 NAME 13.23 STREET ADDRESS 13.24 CITY-ST-ZIP		
12.19 NAME 12.20 STREET ADDRESS 12.21 CITY-ST-ZIP			13.25 TITLE 13.26 NAME 13.27 STREET ADDRESS 13.28 CITY-ST-ZIP		
12.22 NAME 12.23 STREET ADDRESS 12.24 CITY-ST-ZIP			13.29 TITLE 13.30 NAME 13.31 STREET ADDRESS 13.32 CITY-ST-ZIP		



CR2E034 (9/96)

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: *[Signature]* (Diane Drake) 4/21/97 (941) 366-4003