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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

(1)

Mailing Address

DOCUMENT # K69609

BILL DAVIS PROPERTIES, INC.

FILED May 02 1997 8:00am Secretary of State

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C/O FRED HOFFMEIER 5101 N.W. 21ST AVE., SUITE 330 FT. LAUDERDALE FL 33309		5101 N.W. 21ST AVE., SI	C/O FRED HOFFMEIER 5101 N.W. 21ST AVE SUITE 330 FT. LAUDERDALE FL 33309-2731			3. Date Incorporated or Qualified	3a. Date	of Last Re	eport		
·						03/02/1989	U5/U1	/1996			
2. Principal Pi	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Ap	plied For		
21		26	26			65-0097138		No	t Applicable		
Sulte, Apt.	W, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75			
22		27				C. Commode of States Bosies	<u> </u>	Fee Re	quired		
City & State	9	City & State	City & State			6. Election Campaign Financing	_	\$5.00	May Be		
23		28				Trust Fund Contribution		Added t	o Fees		
Zip	Country	Zip	Zip Country			8. This corporation has liability for intangible tax under s. 199.032,					
24	25	29	30			Florida Statutes Yes No					
	9. Name and Address of Curr	ent Registered Agent	10. Name and Address of New Registered Agent								
	FMEIER, FRED		[81	Name						
	1 N.W. 21ST AVE.			82	Street Addre	Strect Address (P.O. Box Number is Not Acceptable)					
	TE 330		Ļ								
FT.	LAUDERDALE FL 33309			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											
	Signature, typed or printed name of registered a			Ager	nt signature require	ed when reinstating)	DATE	DEATAB	0 101 40		
12.	D OFFICERS A	AND DIRECTORS DELETE	13. 1.1 1/1			ADDITIONS/CHANGES TO OFFIC		Change	S IN 12 Addition		
	_	U DECENE					L.	r Change	L) Modition		
NAME DAVIS, WILLIAM H. STREET ADDRESS 5101 N.W. 21ST AVE.				1.2 NAME 1.3 STREET ADDRESS					į		
STREET ADDRESS	FT. LAUDERDALE FL										
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NAME			6.2 NA	ME							
STREET ADDRESS			6.3 \$16	6.3 STREET ADDRESS					}		
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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.