

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

FILED

Apr 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 # **K72986** (8)

1. Corporation Name
MILBY INVESTMENTS, INC.



Principal Place of Business 600 CLEVELAND ST. SUITE 960 CLEARWATER FL 34615	Mailing Address 600 CLEVELAND ST. SUITE 960 CLEARWATER FL 34615-4100
---	--

2. Principal Place of Business 21 3365 Central Ave. Suite, Apt. #, etc.	2a. Mailing Address 26 3365 Central Ave. Suite, Apt. #, etc.	3. Date Incorporated or Qualified 03/15/1989	3a. Date of Last Report 04/12/1996
22 City & State 23 St. Petersburg FL	27 City & State 28 St. Petersburg FL	4. FEI Number 26-4445475	Applied For Not Applicable
24 33713 25 Pinellas	29 33713 30 Pinellas	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
9. Name and Address of Current Registered Agent CHEEK, CAROLL W 600 CLEVELAND ST STE 960 CLEARWATER FL 34615		10. Name and Address of New Registered Agent	
		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable) 3365 Central Ave.	
		83	
		84 City St. Petersburg FL 85 Zip Code 33713	
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>Carroll W. Cheek</i>	(NOTE: Registered Agent signature required when reinstating)	DATE 4/3/97
-----------------------------------	--	--------------------

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD CHEEK, CARROLL W. 600 CLEVELAND ST. 960 CLEARWATER FL <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BARLOW, MARSHA L 600 CLEVELAND ST 960 CLEARWATER FL <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CHEEK-MILBY, KATHLEEN 600 CLEVELAND ST 960 CLEARWATER FL <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: <i>Carroll W. Cheek</i>	DATE 4/3/97	DAYTIME PHONE # 813-3273625
------------------------------------	--------------------	------------------------------------

CR2E034 (9/96)