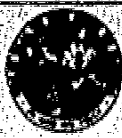


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 19 AM 1:50

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # K88016 (6)

1. Corporation Name
NASSAU BAY PROPERTIES, INC.

Principal Place of Business Mailing Address
**% BRIAN E. INGALLS
301 EAST LAS OLAS BLVD.
FT. LAUDERDALE FL 33301-2228** **% BRIAN E. INGALLS
301 EAST LAS OLAS BLVD.
FT. LAUDERDALE FL 33301-2228**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
05/15/1989 **07/26/1994**

4. FEI Number Applied For
65-0137907 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 Yes No

2. Principal Place of Business 2a. Mailing Address

21 **414 N. Central Ave.** 26 **P. O. Box 1709**
Suite, Apt. #, etc. Suite, Apt. #, etc.

22 **c/o M-726** 27 **M-726**
City & State City & State

23 **Glendale, CA** 28 **Glendale, CA**
Zip Country Zip Country

24 **91203** 25 **USA** 29 **91209** 30 **USA**

9. Name and Address of Current Registered Agent

**INGALLS, BRIAN E.
301 EAST LAS OLAS BLVD.
FT. LAUDERDALE FL 33301**

10. Name and Address of New Registered Agent

81 Name **Suzanne Weiss**

82 Street Address (P.O. Box Number is Not Acceptable) **115 S.E. 13th St., Suite C**

83

84 City **Ft. Lauderdale** FL 85 Zip Code **33316**

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 607.0503, Florida Statutes.

SIGNATURE *Suzanne Weiss* DATE **4-10-95**

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	NYE, JOHN E.
STREET ADDRESS	301 E. LAS OLAS BLVD.
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	DVPT
NAME	BARROR, MEL
STREET ADDRESS	401 N. BRAND
CITY - ST - ZIP	GLENDAL CA
TITLE	DVPS
NAME	MCMILLAN, WILLIAM
STREET ADDRESS	700 N. BRAND
CITY - ST - ZIP	GLENDAL CA
TITLE	DVPS
NAME	INGALLS, BRIAN E.
STREET ADDRESS	301 E. LAS OLAS BLVD.
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	S
NAME	GUMARES, EVA
STREET ADDRESS	301 E. LAS OLAS BLVD.
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Terry D. Hess	
1.3 STREET ADDRESS	414 N. Central Ave.	
1.4 CITY - ST - ZIP	Glendale, CA 91203	
2.1 TITLE	T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	John E. Haynes	
2.3 STREET ADDRESS	414 N. Central Ave.	
2.4 CITY - ST - ZIP	Glendale, CA 91203	
3.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	James R. Eller, Jr.	
3.3 STREET ADDRESS	401 N. Brand Blvd., M-726	
3.4 CITY - ST - ZIP	Glendale, CA 91203	
4.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Melvin F. Barror	
4.3 STREET ADDRESS	401 N. Brand Blvd., M-7	
4.4 CITY - ST - ZIP	Glendale, CA 91203	
5.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Richard A. Fink	
5.3 STREET ADDRESS	414 N. Central Ave.	
5.4 CITY - ST - ZIP	Glendale, CA 91203	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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: **James R. Eller, Jr., Secretary** *James R. Eller* DATE **4/5/95** (818) 500-2404

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #