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

CITY-ST-ZIP

FILED May 06 1997 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # CRESTWOOD INVESTMENTS, INC. Mailing Address Principal Place of Business 1512 EAST BROWARD BLVD. 1512 EAST BROWARD BLVD SUITE 200 SUITE 200 FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 33301-2110 3. Date Incorporated or Qualified 3a. Date of Last Report 09/12/1989 06/21/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0142738 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 25 Yes No 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B**1 MCCRORY, J. WALTER 1512 EAST BROWARD BLVD., SUITE 200 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33301 83 City Zip Code FL 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, typod or printed name of registered agent and title if applicable (NO?) Registrated Agent signature required w 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE MCCRORY, J. WALTER NAME 1.2 NAME 1512 E. BROWARD BLVD.200 STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 1(1)(6 ARNOLD, DAN S. NAME 2.2 NAME 1512 E. BROWARD BLVD.200 STREET ADORESS 2.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 2 4 CITY-ST-7IP DELFTE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 BIREFT ADDRESS CITY-ST-ZIP 4.4 CI1Y - S1 - ZIP DELETE Change Addition TITLE 51 HITLE NAME 5.2 NAME STREET ADDRESS 5.3 BIRELL ADDRESS CITY-ST-ZIP 5.4 CITY-\$1-ZIP DELFTE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 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 eath; 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

WACTOR McCasey shalas