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CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1 22527

(0)

Principal Place C/O JOHN H.	on Name A REGENCY, INC. Ce of Business CRONIN CPA D BAY BLVD. SUITE 200 FL 34625	Mailing Address C/O JOHN H. CRONIN C 2560 GULF TO BAY BLVI CLEARWATER FL 34625-0). Suite 200	3. Date Incorporated or Qualified	3a. Date of Last Re	
				11/29/1989	04/23/1996	
2. Principal Place of Business 21		2e, Mailing Address		4, FEI Number 22-3012515	 	plied For t Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.			□ \$8.75 A	
22		27		5. Certificate of Status Desired	Fee Re	quired
City & Sta	ite	City & State		6. Election Campaign Financing	\$5.00	
23 Zip	Country	28	Country	Trust Fund Contribution B. This corporation has liability for	Added to	
24	25	29	30		Yes No	198.032,
	g, Name and Address of Cur	rrent Registered Agent		10. Name and Address of New Re	gistered Agent	
	ONIN, JOHN H. CPA		81 Name			
2560 GULF TO BAY BLVD. SUITE		200	82 Street Add	dress (P.O. Box Number is Not Acceptat	ole)	
UL	EARWATER FL 34625		83			
			84 City		85 Zip (Code
					FLIT	
- 11 #arsuan	t to the provisions of Sections 607.0					
office or agent 1				rporation submits this statement for the pation's board of directors. I hereby acceptions		registered
SIGNATURE	Signature, typical or printed name of registered	diagent and title diapplicable (NC	TE Registered Agent signature requ	uired when reinstating)	DAYE	
	Signature, typical or printed name of registered				DAYE	
SIGNATURE	Signature, typed in printed name of registered OFFICERS . DPT BOROWSKY, KURT T.	d agenc and tille if applicable (NC AND DIRECTORS DELETE	TE Registered Agent signature requ	uired when reinstating)	DAYE DERS AND DIRECTOR	S IN 12
SIGNATURE 12. THE	Signature, typed in printed name of registered OFFICERS. DPT BOROWSKY, KURT T. 330 SOUTH STREET BX 197	d agenc and tille if applicable (NC AND DIRECTORS DELETE	TE Registered Agent signature required 13.	uired when reinstating)	DAYE DERS AND DIRECTOR	S IN 12
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I am an officer or director of the corporation or supplied with an address.

I suffice a security statutes in Section 119.07(3)(1), 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 of 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 chapter, or or an attachment with an address.

SIGNATURE:

FILED

Apr 16 1997 8:00am

Secretary of State