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Apr 03 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 # L52701 (4)

1. Corporation Name: TRI-OVERTON MANAGEMENT SERVICES, INC.



Principal Place of Business: 2611 BRECCA CT, SUITE 1051, APOPKA FL 32712

Mailing Address: 2611 BRECCA CT, SUITE 1051, APOPKA FL 32712-4050

3. Date Incorporated or Qualified: 02/22/1990

3a. Date of Last Report: 04/30/1996

4. FEI Number: 59-3003303

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

21. 1231 N. CIRCLE DR

22. State, Apt. #, etc.

23. CRYSTAL RIVER FL

24. 34429

25. Country

26. 1231 N. CIRCLE DR

27. Suite, Apt. #, etc.

28. CRYSTAL RIVER FL

29. 34429

30. Country

9. Name and Address of Current Registered Agent: WEATHERFORD, WILLIAM P JR. DEMPSEY & ASSOCIATES 1031 W. MORSE BLVD. WINTER PARK FL 32789

10. Name and Address of New Registered Agent

B1. Name

B2. Street Address (P.O. Box Number is Not Acceptable)

B3.

B4. City

B5. 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|------------------------|---|--|
| TITLE | PD | 1.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | OVERTON, W. SR. | 1.2 NAME | OVERTON, ROBERT W. SR. |
| STREET ADDRESS | 3344 INNISBROOK DR | 1.3 STREET ADDRESS | 1231 N. CIRCLE DR |
| CITY-ST-ZIP | LAKELAND FL | 1.4 CITY-ST-ZIP | CRYSTAL RIVER FL 34429 |
| TITLE | VSTD | 2.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | OVERTON, ROBERT W. JR. | 2.2 NAME | OVERTON, ROBERT W. JR. |
| STREET ADDRESS | 2611 BRECCA CT | 2.3 STREET ADDRESS | 1231 N. CIRCLE DR |
| CITY-ST-ZIP | APOPKA FL | 2.4 CITY-ST-ZIP | CRYSTAL RIVER FL 34429 |
| TITLE | VD | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | PERRY, EUGENE J. | 3.2 NAME | |
| STREET ADDRESS | 816 RIVERBEND BLVD | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | LONGWOOD FL | 3.4 CITY-ST-ZIP | |
| TITLE | | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 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 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: Eugene J. Perry (EUGENE J. PERRY) MAR 31, 1997 407 774-7581

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)