

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

FILED
Apr 30 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L65312 (5)

1. Corporation Name
NITRAM PROPERTIES, INC.



Principal Place of Business 5501 NW 53RD COURT GAINESVILLE FL 32653 US	Mailing Address 5501 NW 53RD COURT GAINESVILLE FL 32653-3249 US
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29

3. Date Incorporated or Qualified 04/11/1990	3a. Date of Last Report 05/01/1996
4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for tangible tax under s. 199.032, Florida Statutes	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> NO

9. Name and Address of Current Registered Agent

**MARTIN, SHERMAN E., SR.
 5501 NW 53RD COURT
 GAINESVILLE FL 32653**

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 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's signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	MARTIN, SHERMAN E., JR.	
STREET ADDRESS	5923 NW 36TH PLACE	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MARTIN, STEVEN E.	
STREET ADDRESS	221 COVINGTON AVENUE, APARTMENT 143	
CITY-ST-ZIP	THOMASVILLE GA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MARTIN, RITA K.	
STREET ADDRESS	4821 SOUTH FORRESTVILLE	
CITY-ST-ZIP	CACO IL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	MARTIN, SHERMAN, SR.	
STREET ADDRESS	5501 N.W. 53RD COURT	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MARTIN, GLORIA	
STREET ADDRESS	5501 N.W. 53RD COURT	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	WASHINGTON
2.4 CITY-ST-ZIP	1804 E. WASHINGTON ST THOMASVILLE GA 31792
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
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 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 for on an attachment with an address.

SIGNATURE: *Sandra B. Mortham* 4/30/97 357

CR2E034 (9/96)