

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L67999 (7)
1. Corporation Name
BUILDING 723 CORPORATION



Principal Place of Business: **723 E COLONIAL DR ORLANDO FL 32803**
Mailing Address: **723 E COLONIAL DR ORLANDO FL 32803**

3. Date Incorporated or Qualified: **04/25/1990** 3a. Date of Last Report: **05/01/1995**
4. FEI Number: **59-0300594** Applied For: 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: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29
9. Name and Address of Current Registered Agent: **BOS, CAREY N. 2903 TRENTWOOD BLVD ORLANDO FL 32812**

10. Name and Address of New Registered Agent: 81, 82, 83, 84, 85
81 Name: _____
82 Street Address (P.O. Box Number is Not Acceptable): _____
83 _____
84 City: _____
85 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: _____ (Date: _____)

12. OFFICERS AND DIRECTORS

12.1 TITLE: DP	12.2 NAME: BOS, HELEN RASKA	12.3 STREET ADDRESS: 2903 TRENTWOOD BLVD	12.4 CITY-STATE-ZIP: ORLANDO FL	<input type="checkbox"/> DELETE
12.5 TITLE: DS	12.6 NAME: BOS, CAREY N.	12.7 STREET ADDRESS: 2903 TRENTWOOD BLVD	12.8 CITY-STATE-ZIP: ORLANDO FL	<input type="checkbox"/> DELETE
12.9 TITLE: DVP	12.10 NAME: GIERACH, JOHN R.	12.11 STREET ADDRESS: 11504 PARK AVE	12.12 CITY-STATE-ZIP: WINDERMERE FL	<input type="checkbox"/> DELETE
12.13 TITLE: DT	12.14 NAME: GIERACH, DEBORAH L.	12.15 STREET ADDRESS: 11504 PARK AVE	12.16 CITY-STATE-ZIP: WINDERMERE FL	<input type="checkbox"/> DELETE
12.17 TITLE:	12.18 NAME:	12.19 STREET ADDRESS:	12.20 CITY-STATE-ZIP:	<input type="checkbox"/> DELETE
12.21 TITLE:	12.22 NAME:	12.23 STREET ADDRESS:	12.24 CITY-STATE-ZIP:	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE:	13.2 NAME:	13.3 STREET ADDRESS:	13.4 CITY-STATE-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.5 TITLE:	13.6 NAME:	13.7 STREET ADDRESS:	13.8 CITY-STATE-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.9 TITLE:	13.10 NAME:	13.11 STREET ADDRESS:	13.12 CITY-STATE-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.13 TITLE:	13.14 NAME:	13.15 STREET ADDRESS:	13.16 CITY-STATE-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.17 TITLE:	13.18 NAME:	13.19 STREET ADDRESS:	13.20 CITY-STATE-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.21 TITLE:	13.22 NAME:	13.23 STREET ADDRESS:	13.24 CITY-STATE-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 119.07(3)(k), 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 _____ address.

SIGNATURE: *Helen Raska* 4/5/96 407/857-6561
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone)

CR2E034 (12/95)