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FILED
Jun 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # M25661 (3)
 1. Corporation Name
LODESTAR TOWER NORTH PALM BEACH, INC.



Principal Place of Business: **630 US HIGHWAY ONE P.O. BOX 14485 N PALM BCH FL 33408**

Mailing Address: **630 US HIGHWAY ONE P.O. BOX 14485 N PALM BCH FL 33408**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		4. FEI Number		Applied For	
21	218 U.S. HIGHWAY #1	26	218 U.S. HIGHWAY #1	01/10/1986		59-2618013		Not Applicable	
22	300	27	300	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75		Additional Fee Required	
23	TEQUESTA, FLORIDA	28	TEQUESTA, FLORIDA	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00		May Be Added to Fees	
24	33469	29	33469	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
GIBBS, RONALD L. 18870 PAINTED LEAF COURT JUPITER FL 33458				81	Name			
				82	Street Address (P.O. Box Number is Not Acceptable)			
				83	000002551030			
				83	-06/08/98--0111--007			
				84	City		85	Zip Code
					FL			

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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, Florida Statutes

SIGNATURE: _____ (Signature) _____ (Name of registered agent and fee, if applicable) _____ (Name of Registered Agent signature required when reinstating) _____ (DATE)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	CEO	<input type="checkbox"/> DELETE	1.1 TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	WILSON, JIM		1.2 NAME	WILSON, G. JAMES			
STREET ADDRESS	14440 CHERRY LANE CT		1.3 STREET ADDRESS	218 U.S. HIGHWAY #1, SUITE 300			
CITY-ST-ZIP	LAUREL MD		1.4 CITY-ST-ZIP	TEQUESTA, FLORIDA 33469 U.S.A.			
TITLE	VD	<input type="checkbox"/> DELETE	2.1 TITLE	D/C	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	DICKIE, PAUL		2.2 NAME	DICKIE, PAUL A.			
STREET ADDRESS	514 CHARTWELL RD		2.3 STREET ADDRESS	218 U.S. HIGHWAY #1, SUITE 300			
CITY-ST-ZIP	OAKVILLE, ONT., CAN		2.4 CITY-ST-ZIP	TEQUESTA, FLORIDA 33469 U.S.A.			
TITLE	PD	<input type="checkbox"/> DELETE	3.1 TITLE	D/P	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	GIBBS, RONALD L.		3.2 NAME	GIBBS, RONALD L.			
STREET ADDRESS	18870 PAINTED LEAF CT		3.3 STREET ADDRESS	218 U.S. HIGHWAY #1, SUITE 300			
CITY-ST-ZIP	JUPITER FL		3.4 CITY-ST-ZIP	TEQUESTA, FLORIDA 33469 U.S.A.			
TITLE	D	<input type="checkbox"/> DELETE	4.1 TITLE	D/S	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	BYRNE, THOMAS F.		4.2 NAME	BYRNE, THOMAS F.			
STREET ADDRESS	8 KING STREET		4.3 STREET ADDRESS	218 U.S. HIGHWAY #1, SUITE 300			
CITY-ST-ZIP	TORONTO, CAN		4.4 CITY-ST-ZIP	TEQUESTA, FLORIDA 33469 U.S.A.			
TITLE	AS	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	T	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition	
NAME	SALIE, DONALD		5.2 NAME	McGEE, NANCY E.			
STREET ADDRESS	630 US HWY ONE		5.3 STREET ADDRESS	218 U.S. HIGHWAY #1, SUITE 300			
CITY-ST-ZIP	N PALM BEACH FL 33408		5.4 CITY-ST-ZIP	TEQUESTA, FLORIDA 33469 U.S.A.			
TITLE	VD	<input type="checkbox"/> DELETE	6.1 TITLE	D/V	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	PATTON, GEORGE		6.2 NAME	PATTON, GEORGE E.			
STREET ADDRESS	514 CHARTWELL ROAD		6.3 STREET ADDRESS	218 U.S. HIGHWAY #1, SUITE 300			
CITY-ST-ZIP	OAKVILLE, ONT CAN		6.4 CITY-ST-ZIP	TEQUESTA, FLORIDA 33469 U.S.A.			

14. I 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: _____ May 1, 1998 416/364-1616

CR2E034 (10/97)