

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

FILED

Apr 23 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 # M69516 (6)

1. Corporation Name
PETERS & COOK, INC.

Principal Place of Business

340 ROYAL PALM WAY
PALM BEACH FL 33480
US

Mailing Address

340 ROYAL PALM WAY
PALM BEACH FL 33480-4305
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified
02/23/1988

3a. Date of Last Report
05/01/1996

4. FEI Number

65-0032104

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

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	ROBERT L. PETERS III	
STREET ADDRESS	340 ROYAL PALM WAY	
CITY-ST-ZIP	PALM BEACH FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	MARK W. COOK	
STREET ADDRESS	340 ROYAL PALM WAY	
CITY-ST-ZIP	PALM BEACH FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	DARLING, CHARLOTTE	
STREET ADDRESS	340 ROYAL PALM WAY	
CITY-ST-ZIP	PALM BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	COOK, EDWARD W.	
STREET ADDRESS	340 ROYAL PALM WAY	
CITY-ST-ZIP	PALM BCH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	ROBERT L. PETERS III	
1.3 STREET ADDRESS	340 ROYAL PALM WAY	
1.4 CITY-ST-ZIP	PALM BEACH, FL	
2.1 TITLE	VPTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	MARK W. COOK	
2.3 STREET ADDRESS	340 ROYAL PALM WAY	
2.4 CITY-ST-ZIP	PALM BEACH, FL	
3.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	COSHER, JANET	
3.3 STREET ADDRESS	340 ROYAL PALM WAY	
3.4 CITY-ST-ZIP	PALM BEACH, FL	
4.1 TITLE	CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	COOK, EDWARD W.	
4.3 STREET ADDRESS	340 ROYAL PALM WAY	
4.4 CITY-ST-ZIP	PALM BEACH, FL	
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, or on an attachment with an address.

SIGNATURE: Robert L. Peters, III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/97

(561) 615-7455

Date

Daytime Phone #

0334452

CR2E034 (9/96)