

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # M72660 (7)

1. Corporation Name

AZALEAVERO, INC.



Principal Place of Business

817 BEACHLAND BOULEVARD
VERO BEACH FL 32963

Mailing Address

817 BEACHLAND BOULEVARD
VERO BEACH FL 32963

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

g. Name and Address of Current Registered Agent

GARRIS, CHARLES E.
817 BEACHLAND BOULEVARD
VERO BEACH FL 32963

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 607.03(2) and 607.15(2), 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 607.05(2), Florida Statutes.

SIGNATURE

Signature of Corporation Officer or Director (Typed Name)

Signature of Registered Agent (Typed Name)

Date

12. OFFICERS AND DIRECTORS

TITLE

DP
GIBSON, JAMES E.
606 AZALEA LANE
VERO BEACH FL

DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

DST
SILKWORTH, LYNN M.
606 AZALEA LANE
VERO BEACH FL

DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-STATE-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-STATE-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-STATE-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-STATE-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

SIGNATURE:

James E. Gibson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2646

407-231-6008

CR2E034 (12/95)