

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

FILED
May 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M88538

(7)

1. Corporation Name

THE CARAVAN COLLECTION, INC.

Principal Place of Business

553 BRANNEN RD
LAKELAND FL 33813

Mailing Address

553 BRANNEN RD
LAKELAND FL 33813-2727



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/06/1988		3a. Date of Last Report 05/01/1996	
21		26		4. FEI Number 59-2902706		Applied For Not Applicable	
22 Suite, Apt. #, etc. 327 Miramar Drive		27 Suite, Apt. #, etc. 327 Miramar Drive		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 City & State		28 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Zip 33803		25 Country		29 Zip 33803		30 Country	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			

ATTAWAY, JOHN
202 EAST WALNUT STREET
LAKELAND FL 33802

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

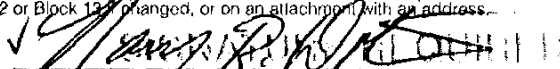
(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOTSON, NANCY R.	1.2 NAME	
STREET ADDRESS	553 BRANNEN ROAD	1.3 STREET ADDRESS	327 Miramar Drive
CITY-ST-ZIP	LAKELAND FL	1.4 CITY-ST-ZIP	33803
TITLE	D	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOTSON, ALBERT M.	2.2 NAME	
STREET ADDRESS	553 BRANNEN RD.	2.3 STREET ADDRESS	327 Miramar Drive
CITY-ST-ZIP	LAKELAND FL	2.4 CITY-ST-ZIP	33803
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 307, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE:



4/29/97 (941) 686-1551

CR2E034 (9/96)