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Apr 24 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N08310 (7)
1. Corporation Name
75 WEST BUSINESS PARK MAINTENANCE CORPORATION



Principal Place of Business: 3578 NW 97TH BLVD. GAINESVILLE FL 32606-2063 US
Mailing Address: 3578 NW 97TH BLVD. GAINESVILLE FL 32606-7323 US

3. Date Incorporated or Qualified: 03/21/1985
3a. Date of Last Report: 04/30/1996
4. FEI Number: 59-2610149
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 Suite, Apt. #, etc. 22 City & State: 23 Zip: 24 Country: 25
2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent
KAPLAN-STEIN, ROBERT
13429 NW 32 PLACE
GAINESVILLE FL 32606

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 3578 NW 97th Blvd.
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

Table with 5 rows and 2 columns: 12. OFFICERS AND DIRECTORS. Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Rows include Robert E. Kaplan-Stein, Dale Kaplan-Stein, Robert Kaplan, Tony Arresu, and Dave Robinson.

Table with 5 rows and 2 columns: 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Columns: 1.1-1.4 TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP; 2.1-2.4 TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP; 3.1-3.4 TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP; 4.1-4.4 TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP; 5.1-5.4 TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP; 6.1-6.4 TITLE, NAME, STREET ADDRESS, 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Dale Kaplan-Stein 4-16-97 352-332-1543 0401
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #0011041

CR2E037 (9/96)