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Jul 01 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N50862
1. Corporation Name
Florida Emu Association, Inc.

Principal Place of Business Mailing Address
18934 Hoblolly Bay Ct. P.O. Box 2283
Jupiter, FL 33458-2755 Jupiter, FL 33468-2283

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	9/16/92	5/14/96
22 City & State	27 City & State	4. FEI Number	Applied For
23 Zip	28 Zip	74-2576262	Not Applicable
24 Country	30 Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
		<input type="checkbox"/>	
		6. Election Campaign Financing	\$5.00 May Be Added to Fees
		Trust Fund Contribution	<input type="checkbox"/>
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<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
	81 Name
	82 Street Address (P.O. Box Number is Not Acceptable)
	83
	84 City
	85 Zip Code
	Arthur L. Nickler 18934 Hoblolly Bay Court Jupiter, FL 33458

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 _____

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	1.1 TITLE
NAME	1.2 NAME
STREET ADDRESS	1.3 STREET ADDRESS
CITY-ST-ZIP	1.4 CITY-ST-ZIP
Lee Chalker - Board "D"	2.1 TITLE
645 E Bet Linet Pr Quincy, FL 32351	2.2 NAME
Bradley Burt - Board "D"	2.3 STREET ADDRESS
894 N. SAMSULA New Smyrna, FL 32168	2.4 CITY-ST-ZIP
Arthur L. NICKLER - Board "D"	3.1 TITLE
18934 Hoblolly Bay Ct. Jupiter, FL 33458-2755	3.2 NAME
LARRY Williams - Board "D"	3.3 STREET ADDRESS
4058 PINE Cone Trail Crestview, FL 32569	3.4 CITY-ST-ZIP
ALAN WILLS - Board "D"	4.1 TITLE
18663 60TH ST. N. Loxahatchee, FL 33470	4.2 NAME
Charles Robertson - Board "D"	4.3 STREET ADDRESS
5190 HARKLEY RUNYAN RD. St. Cloud, FL 34771-9514	4.4 CITY-ST-ZIP
	5.1 TITLE
	5.2 NAME
	5.3 STREET ADDRESS
	5.4 CITY-ST-ZIP
	6.1 TITLE
	6.2 NAME
	6.3 STREET ADDRESS
	6.4 CITY-ST-ZIP
	000002228410
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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: Arthur L. Nickler, Jr. Arthur L. Nickler 5/12/97 (561) 575-6643
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/96)