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Jun 19 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION,
ANNUAL REPORT
1998



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

DOCUMENT # N95000005973 (1)

Corporation Name

BLANCHE ELY HIGH CLASS OF 1970, INC.



Principal Place of Business

Mailing Address

3333 WEST ATLANTIC BOULEVARD SUITE 16
POMPANO BEACH FL 33069

3333 WEST ATLANTIC BOULEVARD SUITE 16
POMPANO BEACH FL 33069

3. Date Incorporated or Qualified

12/20/1995

4. FEI Number

65-0629735

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

8. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PHILLIPS, EDWARD W
3333 W ATLANTIC BLVD, SUITE 16
POMPANO BEACH FL 33069

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 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE RD
NAME PHILLIPS, ED
STREET ADDRESS 3333 WEST ATLANTIC BOULEVARD SUITE 16
CITY-ST-ZIP POMPANO BEACH FL 33069

1.1 TITLE
1.2 NAME Willie James Wright
1.3 STREET ADDRESS 3333 West Atlantic Blvd #16
1.4 CITY-ST-ZIP Pompano Beach FL 33069

TITLE SD
NAME MALONE, BETTY
STREET ADDRESS 3333 WEST ATLANTIC BOULEVARD SUITE 16
CITY-ST-ZIP POMPANO BEACH FL 33069

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE TD
NAME PHILLIPS, FELTON
STREET ADDRESS 3333 WEST ATLANTIC BOULEVARD SUITE 16
CITY-ST-ZIP POMPANO BEACH FL 33069

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D
NAME DIXON, DALLAS
STREET ADDRESS 3333 WEST ATLANTIC BOULEVARD SUITE 16
CITY-ST-ZIP POMPANO BEACH FL 33069

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D
NAME MORRIS, RALPH
STREET ADDRESS 3333 WEST ATLANTIC BOULEVARD SUITE 16
CITY-ST-ZIP POMPANO BEACH FL 33069

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D
NAME Michael McBride
STREET ADDRESS 508 SW 2 St apt 202
CITY-ST-ZIP Pompano Beach FL 33069

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 Ed Phillips

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CR2E037 (10/97)