2245-029

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

APPROVED AND FILED
96 MAR 14 PM 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N96000001575

1. Corporation Name

DREW PARK PROPERTY LEAGUE, INC.

Principal Place of Business

1715 NORTH WESTSHORE BLVD.
SUITE 750
TAMPA FL 33607-3926

Mailing Address

1715 NORTH WESTSHORE BLVD.
SUITE 750
TAMPA FL 33607-3926

3. Date Incorporated or Qualified: 07/06/1992

3a. Date of Last Report: 06/19/1995

4. FEI Number: 59-3145482 [ ] 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 [X] No

2. Principal Place of Business 21 — Suite, Apt. #, etc. 22 — City & State — Zip — 25 Country

2a. Mailing Address 26 — Suite, Apt. #, etc. 27 — City & State 28 — Zip 29 — Country 30

9. **Name and Address of Current Registered Agent**

GRECO, FRANK J.
2112 NORTH 15TH STREET
SUITE 200
TAMPA FL 33605

10. **Name and Address of New Registered Agent**

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

12. OFFICERS AND DIRECTORS

TITLE	D	[ ] DELETE
NAME	SKAATES, LYDIA	
STREET ADDRESS	4301 N. TRASK STREET	
CITY-ST-ZIP	TAMPA FL	
TITLE	D	[ ] DELETE
NAME	LYNN, HELEN	
STREET ADDRESS	8111 RIVERSHORE DRIVE	
CITY-ST-ZIP	TAMPA FL	
TITLE	D	[ ] DELETE
NAME	SUTOR, VIOLA	
STREET ADDRESS	4102 N. LAUBER WAY	
CITY-ST-ZIP	TAMPA FL	
TITLE	D	[ ] DELETE
NAME	JESSEN, DAVID L.	
STREET ADDRESS	5014 N. HESPERIDES	
CITY-ST-ZIP	TAMPA FL	
TITLE	D	[X] DELETE
NAME	BRANCH, MAXINE B.	
STREET ADDRESS	4401 DEARHOUND DRIVE	
CITY-ST-ZIP	LAND O'LAKES FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP		[ ] Change [ ] Addition
2 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP		[ ] Change [ ] Addition
3 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP		[ ] Change [ ] Addition
4 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP		[ ] Change [ ] Addition
5 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	Chris Bittmann / P.O. Box 15423 / TPA, Fla 33684	[X] Change [ ] Addition
6 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		[ ] Change [ ] Addition

14. I do hereby certify that the information supplied with this filing is voluntary, further that I and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lydia Skaates Lydia SKAATES Feb-22, 1996

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)