


FILE NOW: FILING FEE IS \$61.25

FILED  
May 20 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N96000004204 (1) 1. Corporation Name PACT TRUST INCORPORATED			
Principal Place of Business 320 WILMA CIRCLE WEST PALM BEACH FL 33404		Mailing Address 320 WILMA CIRCLE WEST PALM BEACH FL 33404-4618	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
9. Name and Address of Current Registered Agent O'NEILL, HENRY M 320 WILMA CIRCLE RIVIERA BEACH FL 33404		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 FL	
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			
TITLE	P	O'NEILL, BEVERLY C	
NAME		320 WILMA CIRCLE	
STREET ADDRESS		WEST PALM BEACH FL 33404	
CITY-ST-ZIP			
TITLE	VT	O'NEILL, HENRY M	
NAME		320 WILMA CIRCLE	
STREET ADDRESS		WEST PALM BEACH FL 33404	
CITY-ST-ZIP			
TITLE	S	LANDY, PATRICK M	
NAME		320 WILMA CIRCLE	
STREET ADDRESS		WEST PALM BEACH FL 33404	
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE	D	Dr Charles L. Mitzelfeld	
1.2 NAME		17160 Forty First Road	
1.3 STREET ADDRESS		Loxahatchee, FL 33470	
1.4 CITY-ST-ZIP			
2.1 TITLE	D	Mr Carlos A Cerezo Jr.	
2.2 NAME		2217 Soundings Ct.	
2.3 STREET ADDRESS		West Palm Beach, FL 33412	
2.4 CITY-ST-ZIP			
3.1 TITLE			
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE	D	Patrick M. Landy	
4.2 NAME		931 Village Blvd #905	
4.3 STREET ADDRESS		West Palm Beach, FL 33409	
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			
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: _____ DATE: 1-23-97			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			



CR2E037 (9/96)