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FILED  
May 20 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N96000005997 (9)  
1. Corporation Name  
DO THE RIGHT THING OF CHARLOTTE COUNTY, INC.



Principal Place of Business Mailing Address  
1401 SOUTH TAMiami TRAIL PUNTA GORDA FL 33950  
1401 SOUTH TAMiami TRAIL PUNTA GORDA FL 33950-5907

3. Date Incorporated or Qualified 11/25/1996  
3a. Date of Last Report

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

4. FEI Number 65-0751450 Applied For Not Applicable  
5. Certificate of Status Desired A \$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

9. Name and Address of Current Registered Agent  
LAUZON, CHERYL  
5071 LA COSTA ISLAND COURT  
PUNTA GORDA FL 33950

10. Name and Address of New Registered Agent  
81 Name Cerbone Donald M. Capt.  
82 Street Address (P.O. Box Number is Not Acceptable) 1401 South Tamiami Trail  
83 Punta Gorda Police Dept.  
84 City Punta Gorda FL 85 Zip Code 33950

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 officer 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] (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETED
NAME	CERBONE, DONALD M CAPT.	
STREET ADDRESS	1401 SOUTH TAMiami TRAIL	
CITY - ST - ZIP	PUNTA GORDA FL 33950	
TITLE	D	DELETED
NAME	LAUZON, CHERYL	
STREET ADDRESS	5071 LA COSTA ISLAND COURT	
CITY - ST - ZIP	PUNTA GORDA FL 33950	
TITLE	D	DELETED
NAME	PATTERSON, LAUREN H CPA	
STREET ADDRESS	331 SULLIVAN STREET	
CITY - ST - ZIP	PUNTA GORDA FL 33950	
TITLE		DELETED
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETED
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	Change	Addition
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: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone # 726

CR2E037 (9/96)