


FILE NOW: FILING FEE IS \$61.25

FILED

00 MAY -1 AM 11:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT 2000 DOCUMENT # 1. Corporation Name		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
Principal Place of Business 4800 N. Federal Hwy #105 E Boca Raton, FL		Mailing Address 4800 N. Federal Hwy #105 E Boca Raton, FL 33431	
2. Principal Place of Business Suite, Apt. #: etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #: etc. City & State Zip Country	
3. Date Incorporated or Qualified 4/3/98		4. FEI Number 65-0833201	
5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable \$8.75 additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added in Fees	
9. Name and Address of Current Registered Agent Karl Lawrence White & Carl 200 S. Biscayne Blvd - Suite 4900 Miami, FL		10. Name and Address of New Registered Agent Name: Kragg Street Address (P.O. Box Number is Not Acceptable): 33131-2310 City: FL Zip Code	
11. Pursuant to the provisions of Sections 817.0502 and 817.1508, 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 817.0503, Florida Statutes.			
SIGNATURE		(Signature already submitted) DATE	
12. OFFICERS AND DIRECTORS			
TITLE: P, D NAME: Gillette, Thomas STREET ADDRESS: CITY-ST-ZIP:	<input checked="" type="checkbox"/> DELETE	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: T, V NAME: Cook, Paula STREET ADDRESS: CITY-ST-ZIP:	<input checked="" type="checkbox"/> DELETE	1.1 TITLE: P, D 1.2 NAME: Richard Ackerman 1.3 STREET ADDRESS: 4800 N. Federal Hwy Suite 105 E 1.4 CITY-ST-ZIP: Boca Raton, FL 33431	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: Liebrecht, Thomas STREET ADDRESS: CITY-ST-ZIP:	<input checked="" type="checkbox"/> DELETE	2.1 TITLE: V, S 2.2 NAME: Karey Carbaugh 2.3 STREET ADDRESS: 4800 N. Federal Hwy; 105 E 2.4 CITY-ST-ZIP: Boca Raton, FL 33431	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: Goldin, Amy STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> DELETE	3.1 TITLE: D 3.2 NAME: Harry Lerner 3.3 STREET ADDRESS: 2901 Busch Blvd 3.4 CITY-ST-ZIP: Tampa, FL 33618	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: V, S NAME: Goldman, Joel STREET ADDRESS: CITY-ST-ZIP:	<input checked="" type="checkbox"/> DELETE	4.1 TITLE: V, D 4.2 NAME: Amy Goldin 4.3 STREET ADDRESS: 4800 N. Federal Hwy; 105 E 4.4 CITY-ST-ZIP: Boca Raton, FL 33431	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> DELETE	5.1 TITLE: 5.2 NAME: 5.3 STREET ADDRESS: 5.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> DELETE	6.1 TITLE: 6.2 NAME: 6.3 STREET ADDRESS: 6.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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 all addresses, with all other like empowered.

SIGNATURE: Amy Goldin, Amy Goldin, VP + Director 4/25/00