

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P00432 (5)

1. Corporation Name
C-K ASSOCIATES, INC.



Principal Place of Business 17170 PERKINS ROAD BATON ROUGE LA 70810	Mailing Address 17170 PERKINS ROAD BATON ROUGE LA 70810-3817
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3. Date Incorporated or Qualified 12/29/1983	3a. Date of Last Report 03/07/1996
4. FEI Number 72-0920302	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 600 South Barracks St.	26 Suite, Apt. #, etc.
22 Suite 102	27 Suite, Apt. #, etc.
23 Pensacola, FL	28 City & State
24 32501	25 Escambia
29 Zip	30 Country

9. Name and Address of Current Registered Agent CHOPIN, LAMY 2353 MISSION RD. APT. F-3 TALLAHASSEE FL 32304	10. Name and Address of New Registered Agent 81 Name Cynthia Arnold 82 Street Address (P.O. Box Number is Not Acceptable) C-K Associates, Inc. 83 600 South Barracks St., Suite 102 84 City Pensacola 85 Zip Code FL 32501
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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: *Cynthia Arnold* DATE: **1-29-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VSD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHOPIN, LAMY J. JR.	1.2 NAME	
STREET ADDRESS	17735 CREEK HOLLOW	1.3 STREET ADDRESS	
CITY - ST - ZIP	BATON ROUGE LA	1.4 CITY - ST - ZIP	
TITLE	PTD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KENNEDY, WILLIAM G.	2.2 NAME	
STREET ADDRESS	15287 CASTLE RIDGE	2.3 STREET ADDRESS	
CITY - ST - ZIP	BATON ROUGE LA	2.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Lamy Chopin* DATE: **1-23-97** (504) 765-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)