


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

FILED  
May 22 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P05404 (9) 1. Corporation Name ATHERTON COMPANY N.V.		



Principal Place of Business 1200 SMITH ST., STE. 2355 HOUSTON TX 77002	Mailing Address 1200 SMITH ST., STE. 2355 HOUSTON TX 77002
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DO NOT WRITE IN THIS SPACE

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		3. Date Incorporated or Qualified 03/25/1985	
21		26		4. FEI Number 98-0049262	
22		27		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees	
24		29		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent SHAIKH, TERRY C/O ATHERTON COMPANY N.V. 8660 W. IRLO BRONSON MEM. HWY. KISSIMMEE FL 34746		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	
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PS	11 TITLE	
NAME	SHAIKH, TERRY	12 NAME	
STREET ADDRESS	1200 SMITH ST., STE. 2355	13 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX 77002	14 CITY-ST-ZIP	
TITLE		21 TITLE	
NAME	LOONEY, JACQUELINE M	22 NAME	
STREET ADDRESS	1200 SMITH ST., STE. 2355	23 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX 77002	24 CITY-ST-ZIP	
TITLE		31 TITLE	
NAME	D	32 NAME	
STREET ADDRESS	CURACAO INTERN'L TRUST	33 STREET ADDRESS	
CITY-ST-ZIP	DE RUYTRKADE 62	34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME	WILLIAMSTADDT, CURAC	42 NAME	400002534994
STREET ADDRESS		43 STREET ADDRESS	-05/26/98--01047--021
CITY-ST-ZIP		44 CITY-ST-ZIP	***158.75
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attaching page with an address.

SIGNATURE \_\_\_\_\_

CR2E034 (10/97)