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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P11524**

(6)

1. Corporation Name

FIRST WATCH ENTERPRISES, INC.



Principal Place of Business

**1395 MAIN ST.
SARASOTA FL 34236
US**

Mailing Address

**1395 MAIN ST.
SARASOTA FL 34236
US**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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 obligation of, Section 607.0604, Florida Statutes.

SIGNATURE

Signature of the person authorized to file this report

Signature of the person authorized to file this report

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	[] DELETE
PTD	SULLIVAN, JOHN M.	1742 PEREGRINE PT. DRIVE	SARASOTA FL	
SD	PENDERY, PAUL L.	414 ELM AVE.	CINCINNATI OH	
VD	PENDERY, KENNETH L.	4528 SPRING FLOWER CT.	SARASOTA FL	
[] DELETE				
[] DELETE				
[] DELETE				

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	[] Change	[] Addition
11 TITLE					
12 NAME					
13 STREET ADDRESS					
14 CITY-STATE-ZIP					
21 TITLE					
22 NAME					
23 STREET ADDRESS					
24 CITY-STATE-ZIP					
31 TITLE					
32 NAME					
33 STREET ADDRESS					
34 CITY-STATE-ZIP					
41 TITLE					
42 NAME					
43 STREET ADDRESS					
44 CITY-STATE-ZIP					
51 TITLE					
52 NAME					
53 STREET ADDRESS					
54 CITY-STATE-ZIP					
61 TITLE					
62 NAME					
63 STREET ADDRESS					
64 CITY-STATE-ZIP					

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), 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 I am an officer or director, or on an attachment with an address.

SIGNATURE:

Kenneth L. Pendery

Kenneth L. Pendery Pres.

4/2/96 (941)9573579

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)