


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

FILED

Feb 13 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 # P19406 (8)

1. Corporation Name
SCHUETZ ENTERPRISES LTD, CORPORATION

Principal Place of Business
708 S.W. HADDINGTON PLACE
PALM CITY FL 34990-3923

Mailing Address
708 S.W. HADDINGTON PLACE
PALM CITY FL 34990-3923



2. Principal Place of Business 21 4549 S.W. Fenwick Lane Suite, Apt. #, etc.		2a. Mailing Address 26 4549 S.W. Fenwick Lane Suite, Apt. #, etc.		3. Date Incorporated or Qualified 05/26/1988	3a. Date of Last Report 02/06/1996
22 City & State 23 Palm City, FL 24 Zip 34990		27 City & State 28 Palm City, FL 29 Zip 34990		4. FEI Number 36-2581012	Applied For Not Applicable
25 Country		30 Country		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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent SCHUETZ, CAROL 708 S.W. HADDINGTON PLACE PALM CITY FL 33490		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 4549 S.W. Fenwick Lane 83 84 City Palm City FL 85 Zip Code 34990	
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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) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHUETZ, JAMES L 708 S.W. HADDINGTON PL PALM CITY FL	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4549 S.W. Fenwick Lane Palm City, FL 34990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SCHUETZ, CAROL 708 S.W. HADDINGTON PL PALM CITY FL	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4549 S.W. Fenwick Lane Palm City, FL 34990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COGHILL, PAMELA 749 SOUTH ELM ST PALATINE IL	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

CR2E034 (9/96)