


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Sep 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P25045 (6) 1. Corporation Name SOTLTZ MANAGEMENT CO. OF FLORIDA, INC.			
Principal Place of Business 1800 PENNSYLVANIA AVE., WILMINGTON DE 19806 US		Mailing Address 1800 PENNSYLVANIA AVE., WILMINGTON DE 19806	
2. Principal Place of Business 21 301 YAMATO ROAD Suite, Apt. #, etc. 22 3101 City & State 23 BOCA RATON FL Zip 24 33431		2a. Mailing Address 26 301 YAMATO ROAD Suite, Apt. #, etc. 27 3101 City & State 28 BOCA RATON FL Zip 29 33431	
9. Name and Address of Current Registered Agent MORRIS, L STOLTZ III 301 YAMATO RD., SUITE 4199 BOCA RATON FL 33431			
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			
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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC	11 TITLE	
NAME	STOLTZ, MORRIS L., II	12 NAME	
STREET ADDRESS	301 YAMATO RD.	13 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	14 CITY-ST-ZIP	
TITLE	V	21 TITLE	
NAME	MITCHELL, ROBERT R.	22 NAME	
STREET ADDRESS	301 YAMATO RD.	23 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	24 CITY-ST-ZIP	
TITLE		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
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	



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/30/1989	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0097458	Applied for 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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

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:  8/15/97 5719983311

CR2E034 (4/97)