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**Mar 18 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 # **P35748** (3)
1. Corporation Name
AMERICROWN SERVICE CORPORATION



Principal Place of Business: **750 FENTRESS BLVD. DAYTONA BEACH FL 32114 US**
Mailing Address: **750 FENTRESS BLVD. DAYTONA BEACH FL 32114-1214 US**

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 09/30/1991	3a. Date of Last Report 04/16/1996
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 57-0883984	Applied For <input type="checkbox"/> Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Country	29. Country	30. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No

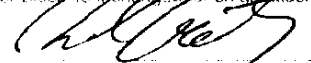
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
TUMBLESON, DOYLE 150-A SOUTH PALMETTO AVE DAYTONA BEACH FL 3211		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83.	
		84. City	FL
		85. Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 female or wife, 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	PD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WAECHTER, GARY G	1.2 NAME	
STREET ADDRESS	750 FENTRESS BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAUNDERS, JOHN R.	2.2 NAME	
STREET ADDRESS	CTY RT. 16 BOX 500	2.3 STREET ADDRESS	
CITY-ST-ZIP	WATKINS GLEN NY	2.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KENNEDY, LESA D.	3.2 NAME	
STREET ADDRESS	1801 W INTL SPDY BLVD	3.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL	3.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARRET, CROTTY W	4.2 NAME	
STREET ADDRESS	1801 W. INTERNATIONAL SPEEDWAY BLVD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GENTRY, MICHAEL G	5.2 NAME	PD
STREET ADDRESS	1801W INTL SPDWY BLVD	5.3 STREET ADDRESS	Gentry, Michael G.
CITY-ST-ZIP	DAYTONA BEACH FL	5.4 CITY-ST-ZIP	750 Fentress Boulevard
TITLE	T <input type="checkbox"/> DELETE	6.1 TITLE	Daytona Beach, FL 32114
NAME	SCHANDEL, SUSAN G	6.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	1801 W INTL SPDWY BLVD	6.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL	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 a 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:  **W. Garrett Crotty/ 3/11/97 (904) 947-6715**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Secretary** Date Daytime Phone #

CR2E034 (9/96)