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May 01 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 # P92000003766 (2)

1. Corporation Name

TOUCAN'S PLACE, INC.

Principal Place of Business

25 5TH AVENUE
INDIANLANTIC FL 32903
US

Mailing Address

25 5TH AVENUE
INDIANLANTIC FL 32903-3152
US

3. Date Incorporated or Qualified
11/05/1992

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~FRESE, GARY B~~
~~930 S HARBOR CITY BLVD.~~
~~STARS-005~~
~~MELBOURNE FL 32901~~

Richard Parker
200 S Harbor City Blvd
Suite 501
Melbourne, FL 32901

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 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

TITLE D
NAME WHITMER, FRED W
STREET ADDRESS 200 S HARBOR CITY BLVD #501
CITY-ST-ZIP MELBOURNE FL 32901

TITLE D
NAME PARKER, RICHARD
STREET ADDRESS 200 S HARBOR CITY BLVD #501
CITY-ST-ZIP MELBOURNE FL 32901

TITLE D
NAME JACOBS, JOHN W
STREET ADDRESS 200 S HARBOR CITY BLVD #501
CITY-ST-ZIP MELBOURNE FL 32901

TITLE D
NAME GILBREATH, W. M
STREET ADDRESS 200 S HARBOR CITY BLVD #501
CITY-ST-ZIP MELBOURNE FL 32901

TITLE D
NAME ALEXANDER, JIMMIE M
STREET ADDRESS 200 S HARBOR CITY BLVD #501
CITY-ST-ZIP MELBOURNE FL 32901

TITLE ST
NAME PARKER, JOAN
STREET ADDRESS 417 MAGNOLIA
CITY-ST-ZIP MELBOURNE BEACH FL 32951

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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 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: X Joan Parker (Sec. TREAS.)

X 4-15-97

X 476-0030

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0000000

CR2E034 (9/96)