

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

FILED
Apr 21 1996 8:00 am
Secretary of State

DOCUMENT # P92000006248 (8)

1. Corporation Name
CENTURION TOWER, INC.



Principal Place of Business %WALTER J. MACKEY, JR. 1601 FORUM PLACE SUITE 805 WEST PALM BEACH FL 33401 US		Mailing Address %WALTER J. MACKEY JR. 1601 FORUM PLACE SUITE 805 WEST PALM BEACH FL 33401 US		3. Date Incorporated or Qualified 11/19/1992	3a. Date of Last Report 02/14/1995
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2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number 65-0373630	Applied For Not Applicable
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 City & State	28 City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Zip	25 Country	29 Zip	30 Country

9. Name and Address of Current Registered Agent MACKEY, WALTER J 772 LAGOON DR N PALM BCH FL 33408				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	Director/Chairman <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRUST, WALTER T	1.2 NAME	Krumm, Walter T.
STREET ADDRESS	4951 GULFSHORE B N-P4301	1.3 STREET ADDRESS	4951 Gulfshore Blvd. N., PH301
CITY-ST-ZIP	NAPLES FL	1.4 CITY-ST-ZIP	Naples, FL 33940-2685
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	Director/President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MACKEY, WALTER J JR.	2.2 NAME	Mackey, Walter J., Jr.
STREET ADDRESS	772 LAGOON DR	2.3 STREET ADDRESS	772 Lagoon Drive
CITY-ST-ZIP	N PALM BCH FL	2.4 CITY-ST-ZIP	North Palm Beach, FL 33408
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	Secretary/Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	Williams, Edward S.
STREET ADDRESS		3.3 STREET ADDRESS	6080 Terra Rosa Circle
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Boynton Beach, FL 33437
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	3000017885 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	-04/22/96--01031--020
STREET ADDRESS		6.3 STREET ADDRESS	***600.00
CITY-ST-ZIP		6.4 CITY-ST-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)(k), 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: _____ Date: 3/22/96 Daytime Phone #: 407/684-8811

CR2E034 (12/95)

4-21-96