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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 19 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P92000006248 (8)

CENTUR	RION TOWER, INC.				
Principal Place	e of Business	Mailing Address		{ I ##81/001 ILO #Q(16 1)OM DA194 ODI(1 UD(1)	ARIN BONE DIILO KITIL ANDRI 1911 (BD)
%WALTER J. MACKEY, JR. %WALTER J. MACKEY JR		WALTER J. MACKEY JR.			
1801 FORUM PLACE SUITE 805 1801 FORUM PLACE SUI]		
		WEST PALM BEACH FL 334	101-8104		
US		US		3. Date Incorporated or Qualified	3a. Date of Last Report
				11/19/1992	04/21/1996
· ·	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	4 -10	26 Suite, Apt. #, etc.		65-0373630	Not Applicable
			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
22 27 City & State City & State			A 51-11-10-10-10-10-10-10-10-10-10-10-10-10		
			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	
23 Zip	Country	Zip	Country		
	25		30	8. This corporation has liability for it Florida Statutes	Yes No
24	9. Name and Address of Curren		30]	10. Name and Address of New Res	
3446			61 Name		
MACKEY, WALTER J 772 LAGOON DR					
			82 Street Add	ress (P.O. Box Number is Not Acceptable	le)
N PALM BCH FL 33408			63	<u> </u>	
			84 City		F 2ip Code
41 Duranast	to the previous of Coations 607 050	2 and 607 1609 Florida Statuta	s the above named core	paration cultimits this statement for the m	urpose of phanging its registered
office or re	egistered agent, or both, in the State	of Florida. Such change was at	ithorized by the corpora	poration submits this statement for the pition's board of directors. I hereby accept	t the appointment as registered
agent La	m familiar with, and accept the obliga	ations of, Section 607.0505, Flor	ida Statutes.		
SIGNATURE	Signature, typed or printed name of registered age	AIOTE.	Registered Agent signatura requi	lead when a loshalian	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	DC	DELETE	1.1 TITLE		Change Addition
NAME	KRUMM, WALTER T	,	1.2 NAME		
SIRSEL ADDRESS 4951 GULFSHORE BOULEVARD NORTH PH301		1.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL 33940-2685		1.4 CITY-ST-ZIP		<u> </u>
TITLE	PD	DELETE	2.1 TITLE		Change Addition
NAME	MACKEY, WALTER J JR.	<u> </u>	2.2 NAME		
	772 LAGOON DRIVE				
STREET ADDRESS	NORTH PALM BEACH FL 3340	NR	2.3 STREET ADDRESS	and the second second	•
CHY-ST-7P TITLE	ST ST	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME	WILLIAMS, EDWARD S	[] Office	3.2 NAME	e e e e e e e e e e e e e e e e e e e	
1	6080 TERRA ROSA CIRCLE		1		<u> </u>
STREET ADORESS	BOYNTON BEACH FL 33437		3.3 STREET ADDRESS		
CHY-ST-ZIP	DOTITION DESCRIPTE 33437	☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
TITLE	16	F-1 pertit	1		Change First Location
NAMÉ			4. 2 NAME		1
STREET ADDRESS			4.3 STREET ADDRESS		\
CHTY - ST - ZHP		DELETE	4.4 CITY - ST-ZIP	·	Change Addition
1 ITLE		F" DETEIC	51 TITLE		Ci change Ci sudition
NAME			5.2 NAME		ļ
STREET ADORESS			5.3 STREET ADDRESS		l
CHY-ST-ZIP		T Delette	5.4 CITY - ST - ZIP		Change Addition
TITLE		☐ DELETE	6.1 TITLE	•	☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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. MACKEY, JR, PRESIDENT 4/21/97 56+654-8811