



SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
 AMOUNT DUE ON OR BEFORE 9/17/97: \$650 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

pg. 1

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P92000011306 (7)
 1. Corporation Name
ATTITUDE LAND DEVELOPERS, INC.

FILED
 97 JUL 24 AM 8:24
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



Principal Place of Business 6551 PRATT DRIVE NEW PORT RICHEY FL 34654 US	Mailing Address 8551 PRATT DRIVE NEW PORT RICHEY FL 34654 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/10/1992	3a. Date of Last Report 04/11/1996
4. FEI Number 59-3160674	Applied For <input type="checkbox"/> 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 6244 Springer Drive	26 6244 Springer Drive
Suite, Apt. #, etc. 22 N/A	Suite, Apt. #, etc. 27 N/A
City & State 23 Port Richey, FL	City & State 28 Port Richey, FL
Zip 24 34668-5340	Country 25 Pasco
Zip 29 34688-5340	Country 30 Pasco

9. Name and Address of Current Registered Agent

**DENNISON, MARILYN
8551 PRATT DRIVE
NEW PORT RICHEY FL 34654**

10. Name and Address of New Registered Agent

81 Name Marilyn Dennison
82 Street Address (P.O. Box Number is Not Acceptable) 6244 Springer Drive
83
84 City Port Richey, FL
85 Zip Code FL 34668-5340

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 re-registering) _____ DATE _____

12. OFFICERS AND DIRECTORS

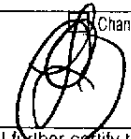
TITLE D	<input type="checkbox"/> DELETE
NAME DENNISON, MARILYN	
STREET ADDRESS 8551 PRATT DRIVE	
CITY-ST-ZIP NEW PORT RICHEY FL	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director/P /S/T	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME DENNISON, Marilyn	
1.3 STREET ADDRESS 10339 Key Lantern Drive	
1.4 CITY-ST-ZIP New Port Richey, FL 34654	
2.1 TITLE Director/V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME Greene, Gwendolyn F.	
2.3 STREET ADDRESS 12715 Woodchuck Way	
2.4 CITY-ST-ZIP Bayonet Point, FL 34667	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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******165.00 ****165.00**

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.



813-845-1267

CR2E034 (4/97)

pg. 2

Attitude Land Developers, Inc.

6244 Springer Drive, Port Richey, FL 34668-5340

State Certified # CUC 025620

Tel. 813-845-1267
Fax. 813-843-0934

Please Note:

Per our telephone conversation, and the information that is in the Department of State computers, the filing fee is only to be \$165.00 total, this time, as late filing was due to a change of address, and the forwarding time had expired.

ATTITUDE LAND DEVELOPERS, INC.

G. F. Greene