

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

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Apr 30 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000014976 (3)

1. Corporation Name  
SUMMETRO, INC.



Principal Place of Business <del>N. 390 S. ORANGE AVENUE</del> <del>SUITE 2300</del> <del>ORLANDO FL 32801</del>	Mailing Address <del>N. 390 S. ORANGE AVENUE</del> <del>SUITE 2300</del> <del>ORLANDO FL 32801</del>
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2. Principal Place of Business 21 390 N. Orange Avenue Suite, Apt. #, etc. 22 1100 City & State 23 Orlando, Florida Zip 24 32801	2a. Mailing Address 26 Post Office Box 4961 Suite, Apt. #, etc. 27 City & State 28 Orlando, Florida Zip 29 32802-4961	Country 25 USA Country 30 USA
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3. Date Incorporated or Qualified 02/26/1993	3a. Date of Last Report 07/15/1996
4. FEI Number 59-3167056	Applied For 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 has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent <del>A.G.S. CO.</del> <del>600 SOUTH ORANGE AVENUE</del> <del>SUITE 2300</del> <del>ORLANDO FL 32801</del>
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10. Name and Address of New Registered Agent 81 Name B&C Corporate Services of Central Florida, Inc. 82 Street Address (P.O. Box Number is Not Acceptable) 390 North Orange Avenue 83 Suite 1100 84 City Orlando FL 85 Zip Code 32801
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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 607.0105, Florida Statutes.

SIGNATURE By: John Brock Ford Vice President 4/24/97  
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	PSTD <input checked="" type="checkbox"/> DELETE
NAME	ASSAF, ASSAF H.
STREET ADDRESS	% 200 S. ORANGE AVENUE, SUITE 2300
CITY-ST-ZIP	ORLANDO FL
TITLE	<input type="checkbox"/> DELETE
NAME	
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	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	ASSAF H. ASSAF
1.3 STREET ADDRESS	390 N. Orange Avenue, Suite 1100
1.4 CITY-ST-ZIP	Orlando, Florida 32801
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	C. DAVID BROWN, II
2.3 STREET ADDRESS	390 N. Orange Avenue, Suite 1100
2.4 CITY-ST-ZIP	Orlando, Florida 32801
3.1 TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	ROBERT T. ROSEN
3.3 STREET ADDRESS	390 N. Orange Avenue, Suite 1100
3.4 CITY-ST-ZIP	Orlando, Florida 32801
4.1 TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	RANDAL M. ALLIGOOD
4.3 STREET ADDRESS	390 N. Orange Avenue, Suite 1100
4.4 CITY-ST-ZIP	Orlando, Florida 32801
5.1 TITLE	S/T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	JANICE MYERS
5.3 STREET ADDRESS	390 N. Orange Avenue, Suite 1100
5.4 CITY-ST-ZIP	Orlando, Florida 32801
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: Sandra B. Mortham (407) 839-4200

CR2E034 (9/96)