

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

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Mar 12 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P93000050781 (2)**

1. Corporation Name  
**WORLDWIDE PROPERTIES OF AMERICA, INC.**



Principal Place of Business <del>1776 RINGLING BLVD</del> <del>SARASOTA FL 34236</del>	Mailing Address <del>1776 RINGLING BLVD</del> <del>SARASOTA FL 34236-6636</del>
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3. Date Incorporated or Qualified <b>07/21/1993</b>	3a. Date of Last Report <b>05/01/1996</b>
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2. Principal Place of Business 21 St <b>10353 Fruitville Road</b> 22 <b>Sarasota, FL 34240-9263</b> 23 City	2a. Mailing Address <b>P.O. Box 3556</b> <b>Sarasota, FL 34230-3556</b>
24 Zip	25 Country <b>USA</b>
26 Zip	29 Country <b>USA</b>

4. FEI Number <b>65-0424646</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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9. Name and Address of Current Registered Agent <del>SMUCKER, DONALD W</del> <del>1776 RINGLING BLVD</del> <del>SARASOTA FL 34236</del> → <b>10353 Fruitville Road</b> <b>Sarasota, FL 34240-9263</b>
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10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 85 Zip Code
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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 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE <del>VPTD</del>	<input checked="" type="checkbox"/> DELETE
NAME <del>WEMMIE, KLAUS</del>	
STREET ADDRESS <del>SEEFELDSQUAI 17, POSTFACH 101</del>	
CITY-ST-ZIP <del>CH-8034 ZURICH SW</del>	
TITLE <del>SD</del>	<input type="checkbox"/> DELETE
NAME <b>NORTON, JOHN W. (ESQ.)</b>	
STREET ADDRESS <b>401 NORTH CICERO</b>	
CITY-ST-ZIP <b>CHICAGO IL</b>	
TITLE <del>D</del>	<input checked="" type="checkbox"/> DELETE
NAME <del>VAN HOUTEN, VRACH</del>	
STREET ADDRESS <del>401 N. CICERO</del>	
CITY-ST-ZIP <del>CHICAGO IL</del>	
TITLE <del>AS</del>	<input type="checkbox"/> DELETE
NAME <b>SMUCKER, DONALD W. (ESQ)</b>	
STREET ADDRESS <del>1776 RINGLING BOULEVARD</del>	
CITY-ST-ZIP <del>SARASOTA FL</del>	
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
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 checked="" type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

Smucker, Donald W. → **10353 Fruitville Road**  
**Sarasota, FL 34240-9263**

D Jacobs, Klaus J  
**809 Longboat Key Club Road**

D Brinkmann, Burkhard  
**Seefeldsqui 17**  
**CH-8034 Zurich Switzerland**

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:  **3/3/97 (941) 377-1006**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Donald W. Smucker, ESQ.**

CR2E034 (9/96)