


FILED

Mar 12 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State <b>DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT # P93000051428 (9)</b>			
<b>1. Corporation Name</b> <b>L/P PROPERTIES &amp; ASSOCIATES, INC.</b>			
<b>Principal Place of Business</b> <b>10115 CROZIER COURT</b> <b>ORLANDO FL 32817</b>		<b>Mailing Address</b> <b>10115 CROZIER COURT</b> <b>ORLANDO FL 32817-2835</b>	
<b>2. Principal Place of Business</b> <b>21</b> Suite, Apt #, etc. <b>22</b> City & State <b>23</b> Zip <b>24</b> Country		<b>2a. Mailing Address</b> <b>26</b> Suite, Apt #, etc. <b>27</b> City & State <b>28</b> Zip <b>29</b> Country	
<b>9. Name and Address of Current Registered Agent</b>			
<b>ENDS, KEVIN B.</b> <b>10115 CROZIER CT</b> <b>ORLANDO FL 32817</b>		<b>81</b> Name <b>82</b> Street Address <b>83</b> <b>84</b> City	
<b>11.</b> Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation is or is not a registered agent, or both, in the State of Florida. Such change was authorized by the corporation and I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.			
<b>SIGNATURE:</b> <i>Kevin B. Ends</i>		(NOTE: Registered Agent signature required)	
<b>12. OFFICERS AND DIRECTORS</b>			
<b>1.</b> <input type="checkbox"/> DELETE <b>NAME:</b> <b>D ENOS, KEVIN B</b> <b>STREET ADDRESS:</b> <b>10115 CROZIER COURT</b> <b>CITY - ST - ZIP:</b> <b>ORLANDO FL 32817</b>		<b>13.</b> <b>1.1 TITLE</b> <b>1.2 NAME</b> <b>1.3 STREET ADDRESS</b> <b>1.4 CITY - ST - ZIP</b>	
<b>2.</b> <input type="checkbox"/> DELETE <b>NAME:</b> <b>STREET ADDRESS:</b> <b>CITY - ST - ZIP:</b>		<b>2.1 TITLE</b> <b>2.2 NAME</b> <b>2.3 STREET ADDRESS</b> <b>2.4 CITY - ST - ZIP</b>	
<b>3.</b> <input type="checkbox"/> DELETE <b>NAME:</b> <b>STREET ADDRESS:</b> <b>CITY - ST - ZIP:</b>		<b>3.1 TITLE</b> <b>3.2 NAME</b> <b>3.3 STREET ADDRESS</b> <b>3.4 CITY - ST - ZIP</b>	
<b>4.</b> <input type="checkbox"/> DELETE <b>NAME:</b> <b>STREET ADDRESS:</b> <b>CITY - ST - ZIP:</b>		<b>4.1 TITLE</b> <b>4.2 NAME</b> <b>4.3 STREET ADDRESS</b> <b>4.4 CITY - ST - ZIP</b>	
<b>5.</b> <input type="checkbox"/> DELETE <b>NAME:</b> <b>STREET ADDRESS:</b> <b>CITY - ST - ZIP:</b>		<b>5.1 TITLE</b> <b>5.2 NAME</b> <b>5.3 STREET ADDRESS</b> <b>5.4 CITY - ST - ZIP</b>	
<b>6.</b> <input type="checkbox"/> DELETE <b>NAME:</b> <b>STREET ADDRESS:</b> <b>CITY - ST - ZIP:</b>		<b>6.1 TITLE</b> <b>6.2 NAME</b> <b>6.3 STREET ADDRESS</b> <b>6.4 CITY - ST - ZIP</b>	
<b>14.</b> I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in information indicated on this annual report or supplemental annual report is true and accurate and that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report appears in Block 12 or Block 13 or Block 14, or on an attachment with an address.			
<b>SIGNATURE:</b> <i>Kevin B. Ends</i>		<b>SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</b>	



CR2E034 (9/96)