

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

FILED  
May 19 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. McRham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000063253 (7)

1. Corporation Name

PARKER-RALEIGH DEVELOPMENT XX, INC.

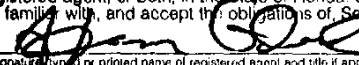


Principal Place of Business 801 N FRANKLIN STREET SUITE 2100 TAMPA FL 33602	Mailing Address 201 N FRANKLIN STREET SUITE 2100 TAMPA FL 33602-5813
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 09/10/1993 3a. Date of Last Report 03/13/1996 4. FEI Number 59-3204157 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 type="checkbox"/> No
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9. Name and Address of Current Registered Agent EDWARDS, JOSEPH D 201 N FRANKLIN STREET SUITE 2100 TAMPA FL 33602	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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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  DATE \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPT	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PARKER, JACK	1.2 NAME	
STREET ADDRESS	118 W. 57TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	1.4 CITY-ST-ZIP	
TITLE	VPAS	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MITCHELL, STEPHEN J.	2.2 NAME	Stephen J. Mitchell
STREET ADDRESS	201 N FRANKLIN STREET SUITE 2100	2.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	2.4 CITY-ST-ZIP	
TITLE	VAS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRADY, DAVID L.	3.2 NAME	
STREET ADDRESS	5500-103 ATLANTIC SPRINGS RD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	RALEIGH NC	3.4 CITY-ST-ZIP	
TITLE	PSD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GLICK, ADAM	4.2 NAME	
STREET ADDRESS	118 W 57TH STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	NY NY 10019	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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:  5-8-97 813-229-3321

CR2E034 (9/96)