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FILED

Jan 21 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000009728 (4)

1. Corporation Name:

INNER CHANGE FACILITATORS, INC.

Principal Place of Business

2718-B NORTH ORANGE AVE.  
ORLANDO FL 32804

Mailing Address

2718-B NORTH ORANGE AVE.  
ORLANDO FL 32804-7811

2. Principal Place of Business

21 1628 Spruce Ave  
Suite, Apt. #, etc.

2a. Mailing Address

26 P.O. Box 1213  
Suite, Apt. #, etc.

City & State

23 Winter Park FL  
Zip Country

City & State

28 Winter Park FL  
Zip Country

24 32789

25 Orange

29 32790

30 Orange

9. Name and Address of Current Registered Agent

HEINKEL, R. LAWRENCE  
225 E. ROBINSON ST.  
SUITE 540  
ORLANDO FL 32801

3. Date Incorporated or Qualified

02/03/1994

3a. Date of Last Report

04/26/1996

4. FEI Number

59-3226058

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84

City

State

Zip Code

85

11. Pursuant to the provisions of Sections 607.0602 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

*Burt Bertram*

(NOTE: Registered Agent signature required when re-appointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D HIDER, MARJORIE  
% 2718-B N. ORANGE AVE.  
ORLANDO FL 32801

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D BERTRAM, BURT  
% 2718-B N. ORANGE AVE.  
ORLANDO FL 32801

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D MILLER, RODNEY  
% 2718-B N. ORANGE AVE.  
ORLANDO FL 32801

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D WATSON, CHRISTINA D  
% 2718-B N. ORANGE AVE.  
ORLANDO FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D Thornton, Georgene S.  
733 Hempstead Ave  
Orlando, FL 32803

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 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:

*Burt Bertram*

1/8/97

407-644-7010

Date

Daytime Phone #

CR2E034 (9/96)