FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIV OF CORPORATIONS
95 MAY -1 AM 10:58

DOCUMENT # P94000011903 (9)

1. Corporate Name
CITRUS MEADOWS ASSET MANAGEMENT, INC.

Principal Place of Business
2216 64TH ST CT E
BRADENTON FL 34208

Mailing Address
2216 64TH ST CT E
BRADENTON FL 34208

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/14/1994
3a. Date of Last Report:

2. Principal Place of Business
21
Suite Apt # or
22
City & State
23
24 25

2a. Mailing Address
26
Suite Apt # or
27
City & State
28
29 30

4. FEI Number: 65-0503472 — 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
6. The corporation has taken the election under S. 1911.032, Florida Statutes. [ ] Yes [ ] No

9. Name and Address of Current Registered Agent
HARDEE, SAM F
2216 64TH ST CT E
BRADENTON FL 34208

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.0508, Florida Statutes, the above named corporation submits the 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 the registered agent, Florida Statutes.

SIGNATURE

12. OFFICER AND DIRECTOR DATA

TITLE	DPT
NAME	HARDEE, SAM F
STREET ADDRESS	2216 64TH ST CT E
CITY, ST, ZIP	BRADENTON FL 34208
TITLE	DVS
NAME	KING, ROBERT E
STREET ADDRESS	4630 60TH ST E
CITY, ST, ZIP	BRADENTON FL 34203

13. ADDITIONS, CHANGES TO OFFICER AND DIRECTOR DATA [ ] Change [ ] Addition

REMITTED BY MAY 1

14. I hereby certify that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(n), Florida Statutes. I further certify that the information indicated on the 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 the report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attached exhibit, as such officer or director.

SIGNATURE: [signature] Pres. 5-10-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

0347076 CP