FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # **P94000035207 (7)**

1. Corporation Name

MANATEE FINANCE OF MELBOURNE, INCORPORATED

Principal Place of Business:
100 HIBISCUS STREET
MELBOURNE FL 32935

Mailing Address:
100 HIBISCUS STREET
MELBOURNE FL 32935

3. Date Incorporated or Qualified: 05/10/1994
3a. Date of Last Report: 02/13/1995
4. FEI Number: 59-3211232 — [ ] 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 [X] Yes [ ] No

2. Principal Place of Business — 21 (Street) / 22 Suite, Apt. #, etc. / 23 City & State / 24 Zip / 25 Country

2a. Mailing Address — 26 (Street) / 27 Suite, Apt. #, etc. / 28 City & State / 29 Zip / 30 Country

9. **Name and Address of Current Registered Agent**

DYER, DAVID W
2200 SOUTH FRONT STREET
MELBOURNE FL 32901

10. **Name and Address of New Registered Agent**

81 Name: S. Wayne Mann
82 Street Address (P.O. Box Number is Not Acceptable): 2745 Turtlemound Rd.
83
84 City: Melbourne FL 85 Zip Code: 32934

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: [signature] S. Wayne Mann 3/29/96

12. OFFICERS AND DIRECTORS

TITLE	D	[ ] DELETE
NAME	ROSS, DANNIE R	
STREET ADDRESS	100 HIBISCUS STREET	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	D	[ ] DELETE
NAME	MANN, S. WAYNE	
STREET ADDRESS	100 HIBISCUS STREET	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		[ ] Change [ ] Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		[ ] Change [ ] Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		[ ] Change [ ] Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		[ ] Change [ ] Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		[ ] Change [ ] Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		[ ] Change [ ] Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: [signature] S.Wayne Mann,Director 3/29/96 407 253 9872

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)