

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000037364 (4)

1. Corporation Name
SENTRY PROPERTY MANAGEMENT, INC.



Principal Place of Business
**235 N.E. SIXTH AVENUE
DELRAY BEACH FL 33483**

Mailing Address:
**235 N.E. SIXTH AVENUE
DELRAY BEACH FL 33483**

2. Principal Place of Business
21. State, Apt. #, etc.
22. City & State
23. Zip
24. Country
25. Country

2a. Mailing Address
26. State, Apt. #, etc.
27. City & State
28. Zip
29. Country
30. Country

3. Date Incorporated or Qualified: **05/06/1994**

3a. Date of Last Report: **05/01/1995**

4. FEI Number: **65-0542064**

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

9. Name and Address of Current Registered Agent

**GALLUP, MARIJANE A
235 N.E. SIXTH AVENUE
DELRAY BEACH FL 33483**

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**

11. Pursuant to the provisions of Sections 607.0602 and 607.0603, 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 607.0605, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: D <input type="checkbox"/> DELETE NAME: GALLUP, MARIJANE A STREET ADDRESS: 235 N.E. SIXTH AVENUE CITY-STATE-ZIP: DELRAY BEACH FL 33483	11. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 12. NAME: 13. STREET ADDRESS: 14. CITY-STATE-ZIP: 15. TITLE: 16. NAME: 17. STREET ADDRESS: 18. CITY-STATE-ZIP: 19. TITLE: 20. NAME: 21. STREET ADDRESS: 22. CITY-STATE-ZIP: 23. TITLE: 24. NAME: 25. STREET ADDRESS: 26. CITY-STATE-ZIP: 27. TITLE: 28. NAME: 29. STREET ADDRESS: 30. CITY-STATE-ZIP:
TITLE: D <input type="checkbox"/> DELETE NAME: GALLUP, JAMES M STREET ADDRESS: 235 N.E. SIXTH AVENUE CITY-STATE-ZIP: DELRAY BEACH FL 33483	31. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 32. NAME: 33. STREET ADDRESS: 34. CITY-STATE-ZIP: 35. TITLE: 36. NAME: 37. STREET ADDRESS: 38. CITY-STATE-ZIP: 39. TITLE: 40. NAME: 41. STREET ADDRESS: 42. CITY-STATE-ZIP: 43. TITLE: 44. NAME: 45. STREET ADDRESS: 46. CITY-STATE-ZIP: 47. TITLE: 48. NAME: 49. STREET ADDRESS: 50. CITY-STATE-ZIP:
TITLE: <input type="checkbox"/> DELETE NAME: STREET ADDRESS: CITY-STATE-ZIP:	51. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 52. NAME: 53. STREET ADDRESS: 54. CITY-STATE-ZIP: 55. TITLE: 56. NAME: 57. STREET ADDRESS: 58. CITY-STATE-ZIP:
TITLE: <input type="checkbox"/> DELETE NAME: STREET ADDRESS: CITY-STATE-ZIP:	59. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 60. NAME: 61. STREET ADDRESS: 62. CITY-STATE-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)(k), 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 or person 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: *M. J. Gallup*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ACCT- 3/14/96 407272-2617

CR2E034 (12/95)