

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Feb 24 1997 8:00am  
Secretary of State

DOCUMENT # P94000044949 (3)

1. Corporation Name:

LOU-ANN PROPERTIES, INC.



Principal Place of Business:

2200 NORTH ATLANTIC AVENUE  
APT. 1202  
DAYTONA BEACH FL 32118

Mailing Address:

2200 NORTH ATLANTIC AVENUE  
APT. 1202  
DAYTONA BEACH FL 32118-3358

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:

06/16/1994

3a. Date of Last Report:

02/15/1996

4. FEI Number:

59-3255681

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

9. Name and Address of Current Registered Agent:

UNATIN, LOUIS  
2200 NORTH ATLANTIC AVENUE  
APT. 1202  
DAYTONA BEACH FL 32118

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 607.0502 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 for Change of Name of Registered Agent and Office (if applicable):

(NOTE: Registered Agent signature required when reinstating)

DATE:

12. OFFICERS AND DIRECTORS:

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PD	UNATIN, LOUIS	2200 NORTH ATLANTIC AVENUE	DAYTONA BEACH FL 32118	<input type="checkbox"/>
STD	UNATIN, ANN	2200 NORTH ATLANTIC AVENUE	DAYTONA BEACH FL 32118	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: *Louis Unatin*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

Daytime Phone #:

CR2E034 (9/96)