

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

FILED

**Mar 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 # P94000079034 (2)

1. Corporation Name
SWIRE BRICKELL TWO INC



Principal Place of Business
**501 BRICKELL KEY DR. STE. 102
% GREGG E. TOLAND
MIAMI FL 33131**

Mailing Address
**501 BRICKELL KEY DR. STE. 102
% GREGG E. TOLAND
MIAMI FL 33131-2617**

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

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

3. Date Incorporated or Qualified **10/27/1994**
3a. Date of Last Report **04/05/1996**
4. FEI Number **65-0534345** 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
**TOLAND, GREGG E
501 BRICKELL KEY DR.
#102
MIAMI FL 33131**

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 for the state with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE		DATE	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
1.1	D KERR, KEITH G 501 BRICKELL KEY DR., #102 MIAMI FL 33131	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2	D TOLAND, GREGG E 501 BRICKELL KEY DR., #102 MIAMI FL 33131	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.3	D OWENS, STEPHEN L 501 BRICKELL KEY DR., #102 MIAMI FL 33131	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.4	D KELLY, J. MEGAN 501 BRICKELL KEY DR., #102 MIAMI FL 33131	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.5	O CARBY, BEVERLY C 501 BRICKELL KEY DR. STE. 102 MIAMI FL 33131	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.6		<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I 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 contained 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]* **3/13/97** **371-3877**
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)