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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000079436 (9)

1. Corporation Name

FLORIDA PRESTIGE PROPERTIES, INC.



Principal Place of Business

15123 MADEIRA WAY  
MADEIRA BEACH FL 33708  
US

Mailing Address

11901 LAGOON LANE  
TREASURE ISLAND FL 33706

2. Principal Place of Business

2a. Mailing Address

21 15103 MADEIRA Way

26 15103 MADEIRA Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 MADEIRA BEACH, FL

28 MADEIRA BEACH, FL

Zip

Zip

Country

Country

24 33708

25 USA

29 33708

30 USA

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MANEY, RICHARD H  
101 E. KENNEDY BLVD.  
SUITE 3170  
TAMPA FL 33602

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

JORG GOBEL, PRESIDENT

NOTE: If a new agent's signature is required when instituting

04/29/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PST  
GOEBEL, JOERG  
11901 LAGOON LANE  
TREASURE ISLAND FL 33706

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
V  
TRUMAN, DAVID A.  
5326 KIRKWOOD AVE  
SPRING HILL FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

VICE PRESIDENT  
GENE LOFGREN  
5220 90 TERRACE  
PINECLIFF PARK, FL 34666  
VICE PRESIDENT  
JEAN C. DOLLAN  
12350 4 ST. E  
TREASURE ISLAND, FL 33706

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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/29/96

(813) 399-0606

CR2E034 (12/95)