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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State

DOCUMENT # P94000081682 (4)

1. Corporation Name
IVY MARY, INC.



Principal Place of Business

7822 COCOBAY CT.
NAPLES FL 33963

Mailing Address

7822 COCOBAY CT.
NAPLES FL 33963

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

LAWSON, LINDA A
866 99TH AVENUE NORTH
NAPLES FL 33963

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 607.0507 and 607.0508, 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 607.0705, Florida Statutes.

SIGNATURE

Linda A. Lawson

Date: 3-21-96

DATE

12. OFFICERS AND DIRECTORS

1. TITLE PSDT [] DELETE

NAME SCHEINHOLZ, IVY
STREET ADDRESS 7822 COCOBAY CT.
CITY-STATE-ZIP NAPLES FL

2. TITLE [] DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

3. TITLE [] DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

4. TITLE [] DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

5. TITLE [] DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

6. TITLE [] DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

7. TITLE [] DELETE

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)(g), 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 return is being prepared to file with the 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

Ivy Scheinholz 3/25/96 941-566-3648

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)