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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



ELORIDA DEFARAMENT OF STATI

Sandra B. Mortham

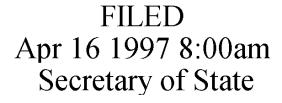
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400083402 (5) VINTAGE PROPERTIES, INC.

Principal Place of Business

5752 VINTAGE OAKS CIRCLE
DELRAY BF 10H FL 33484

DELRAY BEACH FL 33484-6422





					3. Date Incorporated or Qualified 11/14/1994	J	le of Last f	Report
2. Principal	Place of Business	2a. Mailing Address			4. FEI Number	1 00/0		pplied For
21		26			65-0539545		— — − −	ot Applicable
Suite, Ap	ot. #, etc.	Suite, Apt. #, etc.						Additional
22		27			5- Certificate of Status Desired			equired
City & Sta	ate	City & State			6. Election Campaign Financing		\$5.00	May Be
3		28			Trust Fund Contribution		Added	to Fees
Zıp Zıp	Country	Zip	Countr	У	8. This corporation has liability for			199.032,
4	25 29		[30]		Florida Statutes Yes No			
	9. Name and Address of Curre			I Name	10. Name and Address of New Re	gistered A	gent	
	DBER CORPORATE AGENTS INC.		81	Name				
	01 SOUTH BAYSHORE DR.		82 Street Add		ddress (P.O. Box Number is Not Acceptat	ole)		
	TH FLOOR							
ML	AMI FL 33133		83	5				
			84	City			85 Zip	Code
			<u> </u>	<u></u>		FL		
office or	registered agent or both, in the State	of Horida. Such change was a	authorized t	y the corpe	orporation submits this statement for the porgition's board of directors. Thereby accep	of the appo	bintment as	registered
	am familiar with, and accept the oblig				,			
SIGNATURE								
2.	Signature, typed or printed name of registered ag	est and the if applicable (NOT ID DIRECTORS	113.	jent s gr⊌tut€ N	agained when reinstating; ADDITIONS/CHANGES TO OFFICE	DATE PS AND I	DIRECTOR	S IN 12
TITLE	PSTD	DETETE	11 TILLE	·	The state of the s		Change	Addition
NAME	SUTTIN, EUGENE N		1.2 NAME				L Unange	L Vasition
STREET ADDRESS				1 ASSURES				
CITY-ST-ZIP	DELRAY BEACH FL	•	- 1	1 ADDRESS				
TITLE	DEGRAT DEADITIE	DELETE	2.1 10 LE	51.711			Change	Addition
NAME		Barra .	2.2 NAME					
STREET ADDRESS	. 1		1	1 ADDRESS	•			
City-St-zip	1		2 4 CHY	ſ				
TITLE		DELETE	3.1 TILL	31-711			Change	Addition
NAME			3.2 NAM!					<u> </u>
STREET ADDRESS				1 ADDRESS				
CITY-ST-ZIP	Í		3.4. C·1Y-					
TITLE		DELETI	411016	1-			Change	Addition
NAME			4-2 NAME				-	
STREET ADDRESS				1 ADDRESS				
CITY - ST - ZIP			4.4 CH Y -					
TITLE		DECETE	5 1 1 1 1 1	<u> </u>		-	Change	Addition
NAME			5.2 NAME				-	
STREET ADDRESS	;}			1 ADDRESS				
CITY-ST-ZIP			5.4 CHY-					
TITLE		DELFTE	6.1 1(1) (Change	Addition
NAME			6.2 NAME				. 5	
STREET ADDRESS	.}			1 ADDRESS				
CITY-\$1-ZIP			6.4 CITY-	1				
4. Ldo hore	eby certify that the information subshie	d with this filing does not quali	ly for the ex-	amplion sta	ted in Section 119.07(3)(i), Florida Statute	s. I further	certify that	the
informat I am an	ion indicated on this annual report or officer or director of the corporation of in Black 12 or Black 13 if change in a	supplemental annual report is t r the receiver of trustee empow r on an attachment with an add	ruc and acc vered to exe	urate and t cute this re	hat my signature shall have the same lega port as required by Chapter 607, Florida S	l effect as tatutes; ar	if made un id that my i	der oath; tha name

(Geno Suttin)