

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000003030 (0)

1. Corporation Name
26 NORTH, INC.



Principal Place of Business
**2161 PINEWOODS CIRCLE
NAPLES FL 33942**

Mailing Address
**2161 PINEWOODS CIRCLE
NAPLES FL 33942**

3. Date Incorporated or Qualified
01/11/1995

3a. Date of Last Report

4. FEI Number
65-0546652

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

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

24 Country

25

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

**WOLFE, DAVID L
500 FIFTH AVE. SOUTH
SUITE 509
NAPLES FL 33940**

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 _____ DATE _____
SIGNATURE TAKEN IN PRESENCE OF AN OFFICIAL AT THE TIME OF FILING (NOTE: Registered Agent Signature required on annual filing)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

FILE	NAME	STREET ADDRESS	CITY-STATE-ZIP	TITLE	1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-STATE-ZIP	5. TITLE	6. NAME	7. STREET ADDRESS	8. CITY-STATE-ZIP	9. TITLE	10. NAME	11. STREET ADDRESS	12. CITY-STATE-ZIP
<input type="checkbox"/> DELETE	D	PFLUEGER, JOHN W	2161 PINEWOODS CIRCLE NAPLES FL 33942		<input type="checkbox"/> Change <input type="checkbox"/> Addition											
<input type="checkbox"/> DELETE	D	PFLUEGER, GERALDINE S	2161 PINEWOODS CIRCLE NAPLES FL 33942		<input type="checkbox"/> Change <input type="checkbox"/> Addition											
<input type="checkbox"/> DELETE	D	PFLUEGER, ERIK J	2161 PINEWOODS CIRCLE NAPLES FL 33942		<input type="checkbox"/> Change <input type="checkbox"/> Addition											
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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: *Geraldine S. Pflueger*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
GERALDINE S. PFLUEGER

2/16/96 941-263-7111
 DATE OF FILING

CR2E034 (12/95)