

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000014876 (3)

1. Corporation Name

ENCORE INTERNATIONAL LIMITED, INC.



Principal Place of Business

29 SE EGLIN PARKWAY  
FT WALTON BEACH FL 32548

Mailing Address

29 SE EGLIN PARKWAY  
FT WALTON BEACH FL 32548

3. Date Incorporated or Qualified  
02/22/1995

3a. Date of Last Report  
2/22/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number  
59-3318694

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

JENNINGS, WILLIAM K  
205 N 6 STREET  
DEFUNIAK SPRINGS FL 32433

10. Name and Address of New Registered Agent

81 Name  
OVERHOLT PATRICIA

82 Street Address (P.O. Box Number is Not Acceptable)  
29 SE EGLIN PARKWAY

83

84 City  
FT. WALTON BEACH FL

85 Zip Code  
32548

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 PATRICIA OVERHOLT

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent's signature required when resigning)

Date

7-10-96

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
POWERS, JOHN  
652 PELICAN  
FT WALTON BEACH FL 32548

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
OVERHOLT, GARRY  
29 SE EGLIN PARKWAY  
FT WALTON BEACH FL 32548

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
OVERHOLT, PATRICIA  
29 SE EGLIN PARKWAY  
FT WALTON BEACH FL 32548

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Date

Signature of Officer or Director

7-10-96

904-243-1951

CR2E034 (12/95)