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Jan 27 1997 8:00am

Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000014921 (7)

1. Corporation Name
FARRIOR BASEBALL II, INC.



Principal Place of Business

501 E KENNEDY BLVD
STE 1207
TAMPA FL 33602
US

Mailing Address

501 E KENNEDY BLVD
STE 1207
TAMPA FL 33602-5200
US

3. Date Incorporated or Qualified 02/22/1995
3a. Date of Last Report 07/02/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 400 North Tampa Street		2a same		65-0595302		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22 Suite 2630		27		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
23 Tampa, Florida		28					
Zip		Country		Zip		Country	
24 33602		25 US		29		30	

9. Name and Address of Current Registered Agent

FARRIOR, J. REX JR.
501 E KENNEDY BLVD
SUITE 1207
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name J. Rex Farrior, Jr.
82 Street Address (P.O. Box Number is Not Acceptable)
400 North Tampa Street
Suite 2630
83 City Tampa FL 85 Zip Code 33602

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	FARRIOR, J. REX JR.	1.2 NAME	J. Rex Farrior, Jr.
STREET ADDRESS	501 E. KENNEDY BLVD., SUITE 1400	1.3 STREET ADDRESS	400 North Tampa Street
CITY - ST - ZIP	TAMPA FL 33602	1.4 CITY - ST - ZIP	Suite 2630
TITLE	PO	2.1 TITLE	P
NAME	FARRIOR, J R	2.2 NAME	J. Rex Farrior, Jr.
STREET ADDRESS	501 E KENNEDY BLVD, STE 1207	2.3 STREET ADDRESS	400 North Tampa Street
CITY - ST - ZIP	TAMPA FL	2.4 CITY - ST - ZIP	Suite 2630
TITLE		3.1 TITLE	Tampa, FL 33602
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

1/16/97

813/225-1515

Date

Daytime Phone #

CR2E034 (9/96)