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PROFIT CORPORATION **ANNUAL REPORT** 

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

P95000024227 (7)

FENWICK REALTY II, INC.

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



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Principal Place of Busin	ess	Maili	ing Address				* ************************************			
C/O J. WATSON BEA	ACH, INC.		O J. WATSON BE	ACH. INC.	<b>:</b> .					
7 N. MAIN STREET WEST HARTFORD CT 06107			7 N. MAIN STREET West Hartford Ct 06107							
WEST HARTFORD CI	U61U/	**	ESI MANIFOND O	i Goldi			3, Date Incorporated or Qualified 03/21/1995	3a. Date	of Last F	leport
2. Principal Place of Bu	usiness	2a.	Mailing Address				4. FEI Number	····		Applied For
i		26	<del> </del>				65-0586098	<u> </u>		Not Applicable
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.				5. Certificate of Status Desired		• -	5 Additional Required
City & State			City & State				6. Election Campaign Financing		\$5.0	0 May Be
3		28					Trust Fund Contribution			od to Fees
Zip	Country		Zip		Country	·	8. This corporation has liability to		x under s	199.032,
4	25	29		30			Florida Statutes	77		
9. No	me and Address of Co	urrent Registe	ered Agent				10. Name and Address of New	Registered .	Agent	
		-	,	•	81	Name				
HAMBY, LOUIS				82	Street Addr	ress (P.O. Box Number is Not Accepte	able)			
	DINCIANA PLAZA				83			<del> </del>		
PALM BEACH	rl 33480					-			- امدا	in Cod-
					84	City	•	FL	65   Z	tip Code
44 D	ordana of Continue 607	0502 and 607	1508 Etorida Stat	utes the	above-o	amed corror	ration submits this statement for the p	urpose of cha	anging its	registered offi
ar registered agen	t ar bath in the State of	Florida Such	changa was autho	rizad by it	ne corpo	vation's hoar	ird of directors. I hereby accept the ap	pointment as	registere	d agent. I am
Or redistrated eden	d of population of the or	007.0	FOR THE LAW OF THE			ngaon o boo.				
familiar with, and a	coept the obligations of,	Section 607.0	505, Florida Statut	tes.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
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familiar with, and a SIGNATURE	occept the obligations of, typed or printed name of registers	Section 607.0	505, Florida Statut plicable	(es. (NOTE: Regist	tered Agent		od when reinstating)	DATE	DIRECT	ORS IN 12
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oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

TOLO CUIDANTE P. 21. 94 860. 521-4020
Davigne Provide