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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 JUL 31 AM 9:39

DOCUMENT # P95000032805 (0)

1. Corporation Name
PW PROPERTIES, INCORPORATED

Principal Place of Business
7608 GAINESVILLE AVE.
JACKSONVILLE FL 32208

Mailing Address
7608 GAINESVILLE AVE.
JACKSONVILLE FL 32208

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 04/26/1995
3a. Date of Last Report

4. FEI Number: 59-330 8943 — Applied For / Not Applicable

5. Certificate of Status Desired [X] — $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**

ALLEN, SCOTT L
7608 GAINESVILLE AVE.
JACKSONVILLE FL 32208

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

12. OFFICERS AND DIRECTORS

TITLE	Chairman, Director	[ ] DELETE
NAME	Allen, R. Charles	
STREET ADDRESS	8928 Castle Blvd, Unit One	
CITY-ST-ZIP	Jacksonville, FL 32208	
TITLE	President, Director	[ ] DELETE
NAME	Allen, Scott L.	
STREET ADDRESS	7608 Gainesville Ave	
CITY-ST-ZIP	Jacksonville, FL 32208	
TITLE	Secretary, Director	[ ] DELETE
NAME	Allen, Sheldon L	
STREET ADDRESS	2227 Hillside Rd	
CITY-ST-ZIP	Tallahassee, FL 32310	
TITLE	Treasurer, Director	[ ] DELETE
NAME	Allen, Rondall E	
STREET ADDRESS	418 Gaither Drive	
CITY-ST-ZIP	Tallahassee, FL 32310	
TITLE	Director	[ ] DELETE
NAME	Palmer, Lewis	
STREET ADDRESS	6266 Barry Drive West	
CITY-ST-ZIP	Jacksonville, FL 32208	
TITLE	Director	[ ] DELETE
NAME	Foreman, Walter	
STREET ADDRESS	4654 Portsmouth Ave	
CITY-ST-ZIP	Jacksonville, FL 32208	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		[ ] Change [ ] Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		[ ] Change [ ] Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		[ ] Change [ ] Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		[ ] Change [ ] Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		[ ] Change [ ] Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		[ ] Change [ ] Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

-07/31/96--01010--001
****333.75 ****233.75

CR2E034 (12/95)

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, with all other like empowered.

SIGNATURE: [signature] — 30 July 96 — 904/764-3592
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
SCOTT L. ALLEN, President