

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000038071 (3)

1. Corporation Name

FUN CITY, INC.



Principal Place of Business

3812 WOODHAVEN COURT
TITUSVILLE FL 32796

Mailing Address

3812 WOODHAVEN COURT
TITUSVILLE FL 32796

2. Principal Place of Business

21 SAME AS ABOVE

Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 SAME AS ABOVE

Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

FERGUSON, J R
3812 WOODHAVEN COURT
TITUSVILLE FL 32796

3. Date Incorporated or Qualified

05/10/1995

3a. Date of Last Report

NA

4. FEI Number

59-3317027

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

X

Yes

□

No

10. Name and Address of New Registered Agent

81 Name

SAME AS BLOCK 9

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

Signature typed or printed name of registered agent and the corporation

11.01 Registered Agent Signature (signed when necessary)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	FERGUSON, J R	3812 WOODHAVEN COURT	TITUSVILLE FL 32796	<input type="checkbox"/>
VPD	ALLEN, RUSS	POST OFFICE BOX 506 N/A	SCOTTSMORE FL 32775	<input type="checkbox"/>
VPD	HERMANSON, CHUCK	1763 ROBIN HOOD AVENUE	TITUSVILLE FL 32796	<input checked="" type="checkbox"/>
VPD	FERGUSON, SHELLY	3812 WOODHAVEN COURT	TITUSVILLE FL 32796	<input type="checkbox"/>
VPD	ALLEN, CATHY	POST OFFICE BOX 506 N/A	SCOTTSMORE FL 32775	<input type="checkbox"/>
VPD	HERMANSON, DIANA	1763 ROBIN HOOD AVENUE	TITUSVILLE FL 32796	<input checked="" type="checkbox"/>

13.

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	<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>

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:

J. R. Ferguson

J. R. FERGUSON (PRESIDENT)

01/30/96

(407)264-0365

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)