FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT **CORPORATION ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Principal Place of Business Mailing Address 168 HARVARD DR LAKE WORTH FL \$3460 POSSIBLE PROPERTY ASSOCIATES, INC.						
					3. Date Incorporated or Qualified 06/22/1995	3a. Date of Last Report 05/01/1996
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
26 Suite, Apt. #, etc. Suite, Apt. #, etc.					65-0585428	Not Applicable
Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23		28	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Countr	У	8. This corporation has liability fo	
24	25	29	30		Florida Statutes 10. Name and Address of New R	Yes No
LIAN	9. Name and Address of Curren	it Hegistered Agent	81	Name	10. Name and Address of New H	egistered Agent
HANEY, WILLIAM J 168 HARVARD DR						
	E WORTH FL 33460		82	Street A	dress (P.O. Box Number is Not Acceptable)	
			83	1		
			84	City		ar Zio Cada
						FL 85 Zip Code
11. Pursuant t office or re agent. I ar	o the provisions of Sections 607,050 agistered agent, or both, in the State in familiar with, and accept the obligation of the province of	2 and 607,1508, Florida Statu of Florida. Such change was ations of, Section 607,0505, Fl	tes, the abov authorized b orida Statute	re-named by the corp es.	corporation submits this statement for the poration's board of directors. I hereby accoration	purpose of changing its registered ept the appointment as registered
SIGNATURE .	Signature, typed or printed name of registered age	int and title if applicable. (NO)	t : Registered Ad	ient signature	required when reinstating)	DATE
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	PTD	☐ DELETE	1.1 TITLE			Change Addition
NAME	HANEY, WILLIAM J		1.2 NAME	-	•	
STREET ADDRESS	168 HARVARD DR LAKE WORTH FL 33460		1	1 ADDRESS		
CITY-ST-ZIP	VD V	DELETE	1.4 CITY-	S1-ZIP		Change Addition
TITLE NAME	HANEY, CAROL D		2.1 TrilE 2.2 NAME	}		L_ Change Abouton
STREET ADDRESS	10081 12TH WAY N #10			T ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL 33716	•	2. 4 CiTY-	· · · · · · · · · · · · · · · · · · ·		
TITLE	SD	☐ DELETE	3.1 TITLE	<u> </u>		Change Addition
NAME	HANEY, BRIAN J		3.2 NAME	}		
STREET ADDRESS	21-513 LEMON DR #D		3.3 STREE	1 ADDRESS		
CITY-ST-ZIP	EAFB AK 99506		3.4. CITY-	ST-ZIP		
TITLE		(_) DELETE	4.1 TITLE	J		☐ Change ☐ Addition
NAME STREET ADDRESS			4. 2 NAME	1		
CITY-ST-ZIP			4.4 CiTY-	T ADDRESS		
TITLE	77	DELETÉ	5.1 TITLE	51-ZII		Change Addition
NAME .			5.2 NAME			
STREET ADDRESS			5.3 STREE	1 ADDRESS		
CITY-ST-ZIP			5.4 CITY-	S1 - ZIP		
TITLE		LJ DELETE	6.1 TITLE	ł		Change Addition
NAME			6.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP	v certify that the information supplier	with this filing does not quali	6.4 City		lated in Section 119.07(3)(i), Florida Statut	es. I further certify that the
information	n indicated on this annual report or s ficer or director of the corporation or b Block 12 or Block 13 if changed, or	upplemental annual report is t the receiver or trustee empow on an attromment with an add	rue and acc /erød to exe dress.	urate and cute this re	that my signature shall have the same legeport as required by Chapter 607, Florida	al effect as if made under oath: tha