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

APPROVED AND FILED
96 AUG 12 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P95000053620
-080296-01150-021
***235.75 ***235.75

DOCUMENT # P95000053620

1. Corporation Name
Lagniappe Investment Corporation

Principal Place of Business
145 Avenue E, Suite 8
Apalachicola, FL 33320

Mailing Address
145 Avenue E, Suite 8
Apalachicola, FL 33320

3. Date Incorporated or Qualified: 7/5/95
3a. Date of Last Report:

2. Principal Place of Business
21 101 Whispering Pines Circ.
Suite, Apt. #, etc.
22 Unit 3
City & State
23 Apalachicola, FL
Zip 24 32329
Country 25 Franklin

2a. Mailing Address
26 P. O. Box 848
Suite, Apt. #, etc.
27
City & State
28 Apalachicola, FL
Zip 29 32329
Country 30 Franklin

4. FEI Number: 65-0605401 [ ] 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 [X] No

9. Name and Address of Current Registered Agent
Overstreet, Deborah M.
475 Harrison Avenue
Panama City, FL 32401

10. Name and Address of New Registered Agent
81 Name: Timothy M. Warner
82 Street Address (P.O. Box Number is Not Acceptable): 221 McKenzie Avenue
83
84 City: Panama City FL 85 Zip Code: 32401

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: Timothy M. Warner — Signature, typed or printed name of registered agent (attach if applicable) — Timothy M. Warner (for R.A. Registered Agent signature is required when resigning) — 8/15/96 DATE

12. OFFICERS AND DIRECTORS

TITLE	D [ ] DELETE
NAME	Jacob, William A., M.D.
STREET ADDRESS	145 Avenue E, Suite 8
CITY-ST-ZIP	Apalachicola, FL 33320
TITLE	D [X] DELETE
NAME	Erskin, Danny
STREET ADDRESS	145 Avenue E, Suite 8
CITY-ST-ZIP	Apalachicola, FL 33320
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D [X] Change [ ] Addition
1.2 NAME	Jacob, William M., M.D.
1.3 STREET ADDRESS	101 Whispering Pines Circle
1.4 CITY-ST-ZIP	Apalachicola, FL 32329
2.1 TITLE	D [ ] Change [X] Addition
2.2 NAME	Jacob, Teresa
2.3 STREET ADDRESS	101 Whispering Pines Circle
2.4 CITY-ST-ZIP	Apalachicola, FL 32329
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	

CR2E034 (12/95)

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: Teresa L. Jacob — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Teresa Jacob — 8/15/96 Date — (904)653-9798 Daytime Phone #