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Jan 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000056633 (7)

1. Corporation Name
AAA BUSINESS CENTERS, INC.

Principal Place of Business

1225 BENNETT DR
SUITE 201
LONGWOOD FL 32750

Mailing Address

1225 BENNETT DR
SUITE 201
LONGWOOD FL 32750-7621



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

07/21/1995

3a. Date of Last Report

04/02/1996

4. FEI Number

59-3324815

Applied For

Not Applicable

5. Certificate of Status Desired

\$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

BOUTWELL, CONNIE
925 PINE HILL BLVD
GENEVA FL 32732

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

Connie Boutwell

Connie Boutwell, Secretary

1-6-97

DATE

Signature required for a registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	TATUM, M. RAY	
STREET ADDRESS	1225 BENNETT DR SUITE 201	
CITY - ST - ZIP	LONGWOOD FL 32750	
TITLE	D	DELETE
NAME	JOHNSON, TOM	
STREET ADDRESS	1225 BENNETT DR SUITE 201	
CITY - ST - ZIP	LONGWOOD FL 32750	
TITLE	D	DELETE
NAME	JOHNSON, AMY	
STREET ADDRESS	1225 BENNETT DR SUITE 201	
CITY - ST - ZIP	LONGWOOD FL 32750	
TITLE	D	DELETE
NAME	BOUTWELL, TRAVIS	
STREET ADDRESS	1225 BENNETT DR SUITE 201	
CITY - ST - ZIP	LONGWOOD FL	
TITLE	D	DELETE
NAME	BOUTWELL, CONNIE	
STREET ADDRESS	1225 BENNETT DR SUITE 201	
CITY - ST - ZIP	LONGWOOD FL 32750	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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		

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 in an attachment with an address.

SIGNATURE:

Tom Johnson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Tom Johnson, President

1-6-97

Date

(407) 331-5866

Daytime Phone #

CR2E034 (9/96)