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Jun 17 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000064946 (3)

1. Corporation Name

FORUM VENTURES, INC.

Principal Place of Business

28100 U.S. 19 NORTH
SUITE 502
CLEARWATER FL 34621

Mailing Address

P.O. BOX 3218
SUITE 502
CLEARWATER FL 34630-8218
US



2. Principal Place of Business	2a. Mailing Address
21 329 6TH AVENUE	26 329 6TH AVENUE
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State INDIAN ROCKS BEACH, FL	28 City & State INDIAN ROCKS BEACH, FL
24 Zip FL 33785	29 Zip FL 33785
25 Country U.S.A.	30 Country U.S.A.

3. Date Incorporated or Qualified 08/21/1995	3a. Date of Last Report 05/01/1996
4. FEI Number APPLIED FOR 69-3449851	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
RAMON CARRION, P.A. 28100 U.S. 19 NORTH SUITE 502 CLEARWATER FL 34621 NO LONGER		81 Name N/A	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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	PAUL GANZEBOOM	1.2 NAME	PAUL GANZEBOOM
STREET ADDRESS	28100 U.S. 19 NORTH	1.3 STREET ADDRESS	329 6TH AVE.
CITY - ST - ZIP	CLEARWATER FL	1.4 CITY - ST - ZIP	INDIAN ROCKS BEACH, FL 33785
TITLE		2.1 TITLE	VPT
NAME		2.2 NAME	TOM DEWILDE
STREET ADDRESS		2.3 STREET ADDRESS	329 6TH AVE.
CITY - ST - ZIP		2.4 CITY - ST - ZIP	INDIAN ROCKS BEACH, FL 33785
TITLE		3.1 TITLE	SECR. / TREAS.
NAME		3.2 NAME	PAUL GANZEBOOM
STREET ADDRESS		3.3 STREET ADDRESS	3021 S.R. 590 APP. # 432
CITY - ST - ZIP		3.4 CITY - ST - ZIP	CLEARWATER, FL 34691
TITLE		4.1 TITLE	PRESIDENT
NAME		4.2 NAME	JULIE A. PETERS
STREET ADDRESS		4.3 STREET ADDRESS	3021 S.R. 590 APP. # 432
CITY - ST - ZIP		4.4 CITY - ST - ZIP	CLEARWATER, FL 34691
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 on an attachment with an address.

SIGNATURE:

PAUL A GANZEBOOM 8/TR JAN 14TH 1997

CR2E034 (9/96)