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Feb 07 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 # P95000076137 (5)

1. Corporation Name
RTTKN DEVELOPERS, INC.



Principal Place of Business
1700 WELLS ROAD
SUITE 5
ORANGE PARK FL 32073

Mailing Address
1700 WELLS ROAD
SUITE 5
ORANGE PARK FL 32073-2373

3. Date Incorporated or Qualified: 10/03/1995
3a. Date of Last Report: 07/08/1996
4. FEI Number: 59-3337666
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

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 29 30 Zip Country

9. Name and Address of Current Registered Agent
SANTORO, THOMAS C
1700 WELLS ROAD
SUITE 5
ORANGE PARK FL 32073

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: FL

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: THOMAS C. SANTORO, ATTORNEY AT LAW (904)278-8713
NOTE: Registered Agent signature required when reinstating

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	DOWDY, ROY	
STREET ADDRESS	1700 WELLS ROAD, SUITE 5	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE	V	DELETE
NAME	KNOTT, TONY	
STREET ADDRESS	1700 WELLS ROAD, SUITE 5	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE	S	DELETE
NAME	SANTORO, THOMAS C	
STREET ADDRESS	1700 WELLS ROAD, SUITE 5	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE	T	DELETE
NAME	KRINER, KEN	
STREET ADDRESS	1700 WELLS ROAD, SUITE 5	
CITY-ST-ZIP	ORANGE PARK FL 32073	
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	Newman, Nathan, Director	
5.3 STREET ADDRESS	1700 Wells Rd, Suite 5	
5.4 CITY-ST-ZIP	Orange Park, Fl. 32073	
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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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: THOMAS C. SANTORO 1/17/97 (904)278-8713
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)