

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

FILED

**Jan 14 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 # P95000077208 (3)
 1. Corporation Name
CAROLE AND COMPANY PROPERTIES, INC.



Principal Place of Business 6539 CENTRAL AVE. ST. PETERSBURG FL 33710	Mailing Address 6539 CENTRAL AVE. ST. PETERSBURG FL 33710-8412
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 10/02/1995	3a. Date of Last Report 07/09/1996
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 59-3357219	Applied For Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Country	30. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
JOHNSON, TODD 6539 CENTRAL AVE. ST. PETERSBURG FL 33710		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83. City	
		84. 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, 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]* DATE: **1-6-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZAPPALA, CAROLE	1.2 NAME	
STREET ADDRESS	4950 GULF BLVD., #1007	1.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETE BEACH FL 33708	1.4 CITY-ST-ZIP	
TITLE	D/P <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSON, TODD	2.2 NAME	
STREET ADDRESS	7219 THIRD AVE. S	2.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33707	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SPOHN, JIM	3.2 NAME	
STREET ADDRESS	1309 JUNGLE AVE. N	3.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33710	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KERBO, GARY	4.2 NAME	
STREET ADDRESS	14261 82ND TERR. N	4.3 STREET ADDRESS	
CITY-ST-ZIP	SEMINOLE FL 34648	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZAPPALA, JOANNE	5.2 NAME	
STREET ADDRESS	3300 N. CAMINO DE PEORAS	5.3 STREET ADDRESS	
CITY-ST-ZIP	TUCSON AZ 85715	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: *[Signature]* AS REC. DATE: **1-6-97** DAYTIME PHONE # **813 530 5579**

CR2E034 (9/96)