

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

FILED

May 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000082246 (6)

1. Corporation Name
DUCHARME FAMILY EQUITIES, INC.

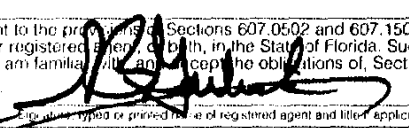
Principal Place of Business 7401 BAY COLONY DRIVE NAPLES FL 33963	Mailing Address 7401 BAY COLONY DRIVE NAPLES FL 34108-7514
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2. Principal Place of Business 21 7401 Bay Colony Dr		2a. Mailing Address 26		3. Date Incorporated or Qualified 10/19/1995	3a. Date of Last Report 02/09/1996
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 65-0619843	Applied For Not Applicable
City & State 23 Naples, FL		City & State 28		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
Zip 24 34108		Zip 29		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
Country 25		Country 30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

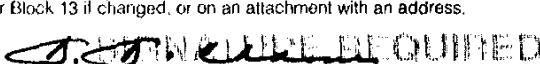
9. Name and Address of Current Registered Agent HILFKE, ALAN F ESQ. 800 LAUREL OAK DRIVE STE 400 NAPLES FL 33963		10. Name and Address of New Registered Agent 81 Name Garlick, Thomas B 82 Street Address (P.O. Box Number is Not Acceptable) 8889 Pelican Bay Blvd, Suite 300 83 84 City Naples FL 85 Zip Code 34108	
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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  DATE **5-19-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUCHARME, DUANE E	1.2 NAME	Ducharme, Duane E.
STREET ADDRESS	7401 BAY COLONY DRIVE	1.3 STREET ADDRESS	7401 Bay Colony Dr
CITY-ST-ZIP	NAPLES FL 33963	1.4 CITY-ST-ZIP	Naples, FL 34108
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUCHARME, BONNIE L	2.2 NAME	Ducharme, Bonnie L.
STREET ADDRESS	7401 BAY COLONY DRIVE	2.3 STREET ADDRESS	7401 Bay Colony Dr
CITY-ST-ZIP	NAPLES FL 33963	2.4 CITY-ST-ZIP	Naples, FL 34108
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		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:  DATE **5-28-97** (941) 514-1453

CR2E034 (9/96)

ANNIS, MITCHELL, COCKEY, EDWARDS & ROEHN

PROFESSIONAL ASSOCIATION

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FACSIMILE: (941) 433-4004

AVAILABLE FOR CONSULTATION
KÄRTEL, VOLLHARDT & PARTNER

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Reply to Naples

May 19, 1997

Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, FL 32302-1500

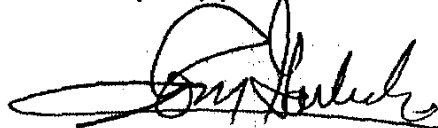
RE: DuCharme Family Equities, Inc.
Ref. Number: P95000082246
Letter Number: 697A00024928

Gentlemen:

I am returning the Profit Corporation Annual Report for 1997 which I have executed as the new Registered Agent. Attached to the Report is my client's check in the amount of \$165.00. Also enclosed is a copy of your letter dated May 9, 1997 for your easy reference.

Please do not hesitate to contact me should you have any questions or need additional information.

Very truly yours,



Thomas B. Garlick

TBG/jpw
Enclosure