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Jun 20 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 # **P96000004303 (9)**

1. Corporation Name
BAYTREE CORP. OF BREVARD

Principal Place of Business	Mailing Address
101 NORTH PLUMOSA ST. MERRITT ISLAND FL 32953	101 NORTH PLUMOSA ST. MERRITT ISLAND FL 32953-3477

3. Date Incorporated or Qualified: **01/12/1996**
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21	26 980 N. Federal Hwy
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 Boca Raton, FL
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 33432-2704 / Country 30

4. FEI Number — [X] 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

KAMRADT, RUSSELL T
777 SO. FLAGLER DRIVE, SUITE 900
WEST PALM BEACH FL 33401

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 Russell T. Kamradt DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	[ ] DELETE	1.1 TITLE	[ ] Change [ ] Addition
NAME	ORLANDO, WARREN		1.2 NAME	
STREET ADDRESS	101 NORTH PLUMOSA ST.		1.3 STREET ADDRESS	
CITY-ST-ZIP	MERRITT ISLAND FL 32953		1.4 CITY-ST-ZIP	
TITLE	D	[ ] DELETE	2.1 TITLE	[ ] Change [ ] Addition
NAME	KILBORNE, DANA		2.2 NAME	
STREET ADDRESS	101 NORTH PLUMOSA ST.		2.3 STREET ADDRESS	
CITY-ST-ZIP	MERRITT ISLAND FL 32953		2.4 CITY-ST-ZIP	
TITLE	D	[ ] DELETE	3.1 TITLE	[ ] Change [ ] Addition
NAME	KELLOGG, WARD		3.2 NAME	
STREET ADDRESS	101 NORTH PLUMOSA ST.		3.3 STREET ADDRESS	
CITY-ST-ZIP	MERRITT ISLAND FL 32953		3.4 CITY-ST-ZIP	
TITLE	D	[ ] DELETE	4.1 TITLE	[ ] Change [ ] Addition
NAME	MARINO, JOHN		4.2 NAME	100002219431
STREET ADDRESS	101 NORTH PLUMOSA ST.		4.3 STREET ADDRESS	-06/23/97--01031--022
CITY-ST-ZIP	MERRITT ISLAND FL 32953		4.4 CITY-ST-ZIP	***173.75
TITLE	D	[ ] DELETE	5.1 TITLE	[ ] Change [ ] Addition
NAME	OWENS, JUNE		5.2 NAME	PE 6-20
STREET ADDRESS	101 NORTH PLUMOSA ST.		5.3 STREET ADDRESS	
CITY-ST-ZIP	MERRITT ISLAND FL 32953		5.4 CITY-ST-ZIP	
TITLE		[ ] DELETE	6.1 TITLE	[ ] Change [ ] Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (9/96)

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: John Marino 4-23-97 (561)288-4000