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Apr 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

DOCUMENT # P96000021621 (3)

1. Corporation Name
VERANDA, INC.

Principal Place of Business
221 MCKENZIE AVE
PANAMA CITY FL 32401

Mailing Address
P O BOX 1661
DESTIN FL 32540-1661



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/04/1996	3a. Date of Last Report NA
21. Suite, Apt. #, etc.	26.	Suite, Apt. #, etc.		4. FEI Number 59-3379457	Applied For Not Applicable
22. City & State	27.	City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23. Zip	28.	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24. Country	29.	Country		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent WALTERS, ELIZABETH J 221 MCKENZIE AVE PANAMA CITY FL 32401		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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	
NAME	CONNART, DAVID	1.2 NAME	
STREET ADDRESS	P O BOX 1161 N/A	1.3 STREET ADDRESS	1234 AIRPORT RD, Suite 121
CITY-ST-ZIP	DESTIN FL 32540	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	
NAME	RUSHING, FRANK	2.2 NAME	Same as above
STREET ADDRESS	P O BOX 1161 N/A	2.3 STREET ADDRESS	
CITY-ST-ZIP	DESTIN FL 32540	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
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: Frank Rushing 4/10/97 904-837-5788
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)