

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

FILED
Mar 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 # P96000024477 (7)

1. Corporation Name
ALL THROESCH, INC.



Principal Place of Business
3101 - 54TH LANE, S.W.
NAPLES FL 33999

Mailing Address
3101 - 54TH LANE, S.W.
NAPLES FL 34116-8027

3. Date Incorporated or Qualified 03/01/1996	3a. Date of Last Report
4. FEI Number 59-3396493	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

THROESCH, JEFFREY D
3101 - 54TH LANE, S.W.
NAPLES FL 33999

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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: *Jeffrey D. Throesch* (President) 3-5-97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D NAME THROESCH, JEFFREY D STREET ADDRESS 3101 - 54TH LANE, S.W. CITY-STATE-ZIP NAPLES FL 33999	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME THROESCH, LINDA D STREET ADDRESS 3101 - 54TH LANE, S.W. CITY-STATE-ZIP NAPLES FL 33999	<input type="checkbox"/> DELETE	1.2 NAME	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	1.3 STREET ADDRESS	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	1.4 CITY-STATE-ZIP	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	2.2 NAME	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	2.3 STREET ADDRESS	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	2.4 CITY-STATE-ZIP	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	3.2 NAME	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	3.3 STREET ADDRESS	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	3.4 CITY-STATE-ZIP	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	4.2 NAME	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	4.3 STREET ADDRESS	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	4.4 CITY-STATE-ZIP	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	5.2 NAME	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	5.3 STREET ADDRESS	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	5.4 CITY-STATE-ZIP	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	6.2 NAME	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	6.3 STREET ADDRESS	
TITLE D NAME THROESCH, STEVEN A STREET ADDRESS 6472 SEA WOLF CT., B-3 CITY-STATE-ZIP NAPLES FL	<input type="checkbox"/> DELETE	6.4 CITY-STATE-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 is based 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: *Jeffrey D. Throesch* 3-5-97 941-455-5793
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

CR2E034 (9/96)