

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

FILED

Apr 18 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P96000028120 (9)**

1. Corporation Name  
**ECB, INC.**



Principal Place of Business <b>8 EAST TOWER CIRCLE ORMOND BEACH FL 32174</b>	Mailing Address <b>8 EAST TOWER CIRCLE ORMOND BEACH FL 32174-8759</b>
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2. Principal Place of Business <b>21 30941 Suneagle Drive</b> Suite, Apt. #, etc.		2a. Mailing Address <b>26 30941 Suneagle Drive</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>03/26/1996</b>	3a. Date of Last Report
22 City & State <b>23 Mt. Dora FL</b>		27 City & State <b>28 Mt. Dora FL</b>		4. FEI Number <b>59-3379065</b>	Applied For Not Applicable
24 Zip <b>32757</b>	25 Country <b>USA</b>	29 Zip <b>32757</b>	30 Country <b>USA</b>	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>				<b>\$5.00 May Be Added to Fees</b>	
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 <b>PALMETTO CHARTER SERVICES, INC. 150 MAGNOLIA AVENUE DAYTONA BEACH FL 32115-2491</b>				10. Name and Address of New Registered Agent	
81 Name <b>CT Corporation Systems</b>				82 Street Address (P.O. Box Number is Not Acceptable) <b>1200 South Pine Island Road</b>	
83				84 City <b>Plantation FL</b>	
				85 Zip Code <b>33324</b>	

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 *Kentel P. Bell* - Assistant Secretary DATE \_\_\_\_\_  
Signatures typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstalling)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	<b>D</b>	<b>CULBRETH, S.C. JR.</b>	<b>8 EAST TOWER CIRCLE ORMOND BEACH FL 32174</b>		<b>AS</b>		
	<b>D</b>	<b>EATMAN, ROGER</b>	<b>2878 KILKIERANE DRIVE TALLAHASSEE FL 32308</b>		<b>P</b>		
	<b>D</b>	<b>BANNON, GEORGE</b>	<b>15500 CEDAR BLUFF PLACE WEST PALM BEACH FL 33401</b>		<b>T/S/V</b>		

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 in an attachment with an address.

SIGNATURE: *[Signature]* 4/7/97 352/735-1800

CR2E034 (9/96)