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Jan 29 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 # P96000033444 (6)

1. Corporation Name
FASTNET DEVELOPMENTS, INC.

Principal Place of Business
1845 BOUGAINVILLE STREET
SARASOTA FL 34239

Mailing Address
1845 BOUGAINVILLE STREET
SARASOTA FL 34239-5116

3. Date Incorporated or Qualified 04/12/1996
3a. Date of Last Report

2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-3375 336		Applied For Not Applicable	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
22 City & State		27 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
23 Zip		28 Zip		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
24 Country		29 Country		30 Country			

9. Name and Address of Current Registered Agent

SHARP, WILLIAM M SR
4830 WEST KENNEDY BOULEVARD #745
TAMPA FL 33609

10. Name and Address of New Registered Agent

81 Name Kenea M. Glendinning
82 Street Address (P.O. Box Number is Not Acceptable)
1858 Ringling Boulevard
83
84 City Sarasota FL 85 Zip Code 34236

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 Kenea M. Glendinning 1/22/97
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
<input type="checkbox"/> DELETE	MURRAY, JOHN P	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	OAKWOOD HIGHTOWN HILL RINGWOOD HANTS	1.3 STREET ADDRESS	
	BH24 3HG ENGLAND	1.4 CITY-ST-ZIP	
<input type="checkbox"/> DELETE	MURRAY, GLYNIS	2.1 TITLE	2.2 NAME
	OAKWOOD HIGHTOWN HILL RINGWOOD HANTS	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
	BH24 3HG ENGLAND	3.1 TITLE	3.2 NAME
<input type="checkbox"/> DELETE		3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
		4.1 TITLE	4.2 NAME
<input type="checkbox"/> DELETE		4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
		5.1 TITLE	5.2 NAME
<input type="checkbox"/> DELETE		5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
		6.1 TITLE	6.2 NAME
<input type="checkbox"/> DELETE		6.3 STREET ADDRESS	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: John P. Murray, Director 1/22/97 (941) 366-3393
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)