

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

FILED

May 08 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 # P96000038615 (6)

1. Corporation Name
MATHENY & ASSOCIATES, INC.



Principal Place of Business
2223 TREEHAVEN CIRCLE
FT MYERS FL 33907

Mailing Address
P O BOX 61102
FT MYERS FL 33906-1102

3. Date Incorporated or Qualified
05/06/1996

3a. Date of Last Report

2. Principal Place of Business
21 27725 Old 41 Rd.

2a. Mailing Address
26

4. FEI Number
65-0662743

Applied For
Not Applicable

Suite, Apt. #, etc.
22 SUITE 101

27

5. Certificate of Status Desired \$8.75 Additional Fee Required

City & State
23 BONITA SPRINGS FL

28

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

Zip Country
24 34135 25 Lee

29 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MATHENY, DANA B
2223 TREEHAVEN CIRCLE
FT MYERS FL 33907

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
422 PARKWAY COURT
83
84 City Ft. Myers FL 85 Zip Code 33919

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 Dana B. Matheny DATE 4/27/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
D	MATHENY, DANA B	2223 TREEHAVEN CIRCLE	FT MYERS FL 33907	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
		PO BOX 27725 Old 41 Rd. - Suite 101	BONITA SPRINGS, FL 33135	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: Dana B. Matheny DATE: 4/27/97 DAYTIME PHONE #: 941-498-3377

CR2E034 (9/96)