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May 02 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 # P96000046610 (7)					
1. Corporation Name ESPOSITO, CHEEK & ASSOCIATES, INC.					
Principal Place of Business 6650 SOUTHPOINT PARKWAY SUITE 225 JACKSONVILLE FL 32216			Mailing Address 6650 SOUTHPOINT PARKWAY SUITE 225 JACKSONVILLE FL 32216-0831		
2. Principal Place of Business 21 4540 Southside Blvd. Suite, Apt. #, etc. 22 SUITE 502 City & State 23 JACKSONVILLE, FL. Zip 24 32216		2a. Mailing Address 26 4540 Southside Blvd. Suite, Apt. #, etc. 27 SUITE 502 City & State 28 JACKSONVILLE, FL. Zip 29 32216		Country 30 U.S.	
9. Name and Address of Current Registered Agent KOEGLER, STEVEN C 10151 DEERWOOD PARK BLVD. BUILDING 100, SUITE 200 JACKSONVILLE FL 32256					
10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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 Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 1.5 CITY-ST-ZIP 1.6 CITY-ST-ZIP 1.7 CITY-ST-ZIP 1.8 CITY-ST-ZIP 1.9 CITY-ST-ZIP 1.10 CITY-ST-ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 1.5 CITY-ST-ZIP 1.6 CITY-ST-ZIP 1.7 CITY-ST-ZIP 1.8 CITY-ST-ZIP 1.9 CITY-ST-ZIP 1.10 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:  ROBERT D. ESPOSITO JR. 4-22-97 904-641-6649					



CR2E034 (9/96)