

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

FILED

**Jun 06 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000056652 (6)
 1. Corporation Name
OLVENHAIN ESTATES, INC.



Principal Place of Business 5355 TOWN CENTER ROAD SUITE 301 BOCA RATON FL 33486	Mailing Address 5355 TOWN CENTER ROAD SUITE 301 BOCA RATON FL 33486-1088
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3. Date Incorporated or Qualified 07/01/1996	3a. Date of Last Report
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2. Principal Place of Business 21 102 North Swinton Ave.	2a. Mailing Address 26 102 North Swinton Ave.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State Delray Beach, FL	28 City & State Delray Beach, FL
24 Zip 33444	25 Country USA
29 Zip 33444	30 Country USA

4. FEI Number 65-0690740	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**SCHWARTZ, ROBERT M
5355 TOWN CENTER ROAD
SUITE 301
BOCA RATON FL 33486**

10. Name and Address of New Registered Agent

81 Name Schwartz, Robert M
82 Street Address (P.O. Box Number is Not Acceptable)
83 102 North Swinton Avenue
84 City Delray Beach FL 85 Zip Code 33444

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 *Robert M. Schwartz* **Robert M. Schwartz** **3/3/97**
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> DELETE
NAME	PARISER, PAUL S
STREET ADDRESS	5355 TOWN CENTER ROAD, SUITE 301
CITY-ST-ZIP	BOCA RATON FL 33486
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Pres <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Pariser, Paul S
1.3 STREET ADDRESS	102 North Swinton Ave
1.4 CITY-ST-ZIP	Delray Beach, FL 33444
2.1 TITLE	V.P./Sec/Treas <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Reid, Lucie S.
2.3 STREET ADDRESS	102 North Swinton Avenue
2.4 CITY-ST-ZIP	Delray Beach, FL 33444
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
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.

CR2E034 (9/96)