

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED  
AND  
FILED

pg. 1 of 2

97 AUG -8 PM 3:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P96000076065 (7)**

1. Corporation Name  
**ENGLISH ESTATES, INC.**

Principal Place of Business  
**2825 LEWIS SPEEDWAY  
ST. AUGUSTINE FL 32095**

Mailing Address  
**2825 LEWIS SPEEDWAY  
ST. AUGUSTINE FL 32095**

<b>2. Principal Place of Business</b>		<b>2a. Mailing Address</b>		<b>3. Date Incorporated or Qualified</b> <b>09/10/1996</b>		<b>3a. Date of Last Report</b>	
<b>21</b> Suite, Apt. #, etc.	<b>26</b> Suite, Apt. #, etc.	<b>4. FEI Number</b>		<input checked="" type="checkbox"/> Applied For		<input type="checkbox"/> Not Applicable	
<b>22</b> City & State	<b>27</b> City & State	<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>			
<b>23</b> Zip	<b>28</b> Zip	<b>6. Election Campaign Financing Trust Fund Contribution</b> <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>			
<b>24</b> Country	<b>29</b> Country	<b>8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.</b> <input type="checkbox"/> Yes <input type="checkbox"/> No					
<b>9. Name and Address of Current Registered Agent</b>				<b>10. Name and Address of New Registered Agent</b>			
<b>BROWN, ANTHONY W 2825 LEWIS SPEEDWAY ST. AUGUSTINE FL 32095</b>				<b>81</b> Name			
				<b>82</b> Street Address (P.O. Box Number is Not Acceptable)			
				<b>83</b>			
				<b>84</b> City	<b>85</b> Zip Code	<b>FL</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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, ANTHONY W	1.2 NAME	
STREET ADDRESS	21 SEASIDE CAPERS	1.3 STREET ADDRESS	
CITY-ST-ZIP	ST. AUGUSTINE FL 32095	1.4 CITY-ST-ZIP	
TITLE	ST	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIS, PATRICIA	2.2 NAME	
STREET ADDRESS	313 ARAQUAY AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	ST. AUGUSTINE FL 32095	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 \_\_\_\_\_

CP2E034 (4/97)

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To: Florida Department of State

Re: Annual Corporate Report  
English Estates, Inc.  
Doc # P96000076065

We are asking for a waiver of the filing penalty imposed for not filing our report by May 1, 1997. This is the first year of the Corporation and the 5/1 deadline was unintentionally overlooked. We moved from our address in February and the mail has been mixed up. We never received the first notice. We have straightened this out since then and we did receive the second notice. We are enclosing the report and a check for \$165.00 per our conversation with the state.

Sincerely,



Anthony Brown, President  
7/30/97