
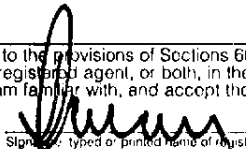
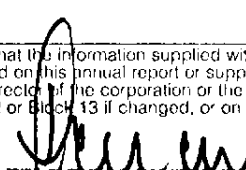


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

APPROVED
AND
FILED

97 AUG 26 PM 1:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 1. Corporation Name		P96000076872			
TROTTERS INVESTMENTS INC					
Principal Place of Business 5560 Bee Ridge Road, D-2 Sarasota FL 34233		Mailing Address Same			
2. Principal Place of Business 21 AS ABOVE		2a. Mailing Address 26		3. Date Incorporated or Qualified 9/13/96	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3a. Date of Last Report N/A	
22 City & State		27 City & State		4. FEI Number <input checked="" type="checkbox"/> Applied For Not Applicable	
23 Zip		28 Zip		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25 Country		30 Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent					
10. Name and Address of New Registered Agent					
81 Name PAUL HATHAWAY					
82 Street Address (P.O. Box Number is Not Acceptable) 5560 Bee Ridge Road, D-2					
83					
84 City Sarasota FL 85 Zip Code 34233					
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 		PAUL HATHAWAY		8/18/97	
<small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE <input type="checkbox"/> DELETE 1.2 NAME Paul Hathaway <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition					
1.3 STREET ADDRESS 5560 Bee Ridge Road, D-2					
1.4 CITY - ST - ZIP Sarasota, FL 34233					
2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY - ST - ZIP					
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.					
SIGNATURE: 		PAUL HATHAWAY		8/18/97	
<small>Signature typed or printed name of signing officer or director Date Daytime Phone #</small>					

CR2E034 (9/96)