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

PROFIT CORPORATION . **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthain

FILED

Jun 18 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000084714 (0)

Principal Place of Business Mailing Address 1675 PALM BEACH LAKES BLVD. SUITE 1002 WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401-2119											
								3. Date Incorporated or Qualified 10/10/1996	3a. D	ate of Last R	eport
2. Principal P	lace of Business	2a. Mailir	ng Address					4. FELNumbor		Ap	plied For
21		26						65-0702871	·		ot Applicable
Suite, Apt.		27						5. Certificate of Status Desired		\$8.75 A	
City & State	9		City & State					6. Election Campaign Financing		\$5.00	May Be
23		28		 				Trust Fund Contribution		Added t	
Zip					Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
24		25 29 30 Name and Address of Current Registered Agent						Florida Statutes 10. Name and Address of New F			 ,
	BEY, JOHN R				81	Name		10. 110.10 0110 11001000 01 11011 1	-Biorniod	- Hair	
1875 PALM BEACH LAKES BLVD.											
SUITE 1002					82	Street	Addres	ss (P.O. Box Number is Not Accept	able)		
WEST PALM BEACH FL 33401					83						
	. , , , <u></u>			ļ						. , , ,	
					84	City			FL	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 Fiorida. 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 ager	nt and title if applica	able [NO	Tt : Hogistored	Age	nt signatur	e requirad	when reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS		13.				ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 12
TITLE	D		DELETE	1.1 TIT	LE		C			Change	X Addition
NAME,	ERBEY, WILLIAM C						1				
STREET ADDRESS	1675 PALM BEACH LAKES BL	D. STE 1002			1.3 STREET ADDRESS						1
CITY-ST-ZIP	WEST PALM BEACH FL 33401			1.4 CI	[Y - S]	I - ZIP	<u> </u>				
TITLE			DELETE	2.1 111	LE		PCE	-		Change	Addition
NAME				2 2 NA	ME			MAN, PAUL L.			ļ
STREET ADDRESS				•		ADDRESS	167	5 PALM BEACH LAKES	BLVD.	, #1002	: }
CITY-ST-ZIP		···-	DELETE	2 4 CI		1 - 7/P	1	T PALM BEACH FL		Change	Addison
TITLE NAME			☐ NULLETE	3.1 TIT 3.2 NA			EVP			∟ unange	Addition
STREET ADDRESS				1		address		KAS, ROBERT A.			1
CITY-ST-ZIP				3 4. Ci			107	5 PALM BEACH LAKES	BLVD.	<i>,</i> #1002	
TITLE			DELETE	4 1 1/3		1.11	S	T PALM BEACH FL		Change	X Addition
NAME	•			4.2 N			1	HN R. ERBEY			X
STREET ADDRESS						ADDRESS	1				
CITY-ST-ZIP				4.4 CIT			1107	5 PALM BEACH LAKES	RTAD.	<i>,</i> #1002	:
TITLE			☐ DELETE	5.1 1.11				T PALM BEACH FL		Change	Addition
NAME				5.2 NA	ME		SVP.	·			
STREET ADDRESS				5.3 ST	REF1.	ADDRESS		TOWSKI, JOSEPH A.		tr =	
CITY-\$T-ZIP				5.4 CI	ry - \$1	I - ZIP	10/	5 PALM BEACH LAKES	BLVD.		
TITLE			☐ DELETE	6.1 111	LE		,	T PALM SEACH FL		Change	Addition
NAME				6.2 NA	ME		SVP	VD0 *0 *V -			
STREET ADDRESS				6.3 S1	REET	ADDRESS	RAKI	NES, JOHN R.			ļ

14. I do hereby certify that the information ship information indicated on this annual sport of I am an officer or director of the conformation appears in Block 12 or Block 13 it changed

CITY - ST - ZIP

ing does not qualify for the exemption siNES(TSRATM19)F(MOHF) as Statutes. I further certify that the same logal effect as if made under oath; that or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name achipment with an address.

1675 PALM BEACH LAKES BLVD., #1002