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

Mailing Address

3170 N. FEDERAL HIGHWAY

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

3170 N. FEDERAL HIGHWAY

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000087602 (4)

LIGHTHOUSE PROPERTY MANAGEMENT, INC.

SUITE 100 SUITE 100 LIGHTHOUSE POINT FL 33064-6721 LIGHTHOUSE POINT FL 33064 3. Date Incorporated or Qualified 3a. Date of Last Report 10/23/1996 2. Principal Place of Business 4, FEI Number 2a. Mailing Address Applied For 65-0700 331 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SMITH, ROBERT H 3170 N. FEDERAL HIGHWAY 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 100 83 LIGHTHOUSE POINT FL 33064 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. Fam familier with, and accept the obligators of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change THILE 1.1 TITLE Addition SMITH, ROBERT H NAME 1.2 NAME 3170 N FEDERAL HWY, STE 100 STREET ADDRESS. 1.3 STREET ADORESS LIGHTHOUSE POINT 1.4 CITY - ST - ZIP CITY-SI THE Change Addition 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-SI-701 34, CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CCY-SI-70 DELETE Addition 51 THILE THEF NAME 5.2 NAME STHEET ADDRESS **5.3 STREET ADDRESS** CPY-SI-74 5.4 CITY-ST-ZIP DELETE Addition 61 TITLE THILE NAME 62 NAME **6.3 STREET ADDRESS** STREET ADDRESS 64 CITY-ST-ZIP DITY-\$1-762 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 13 if chapped, or on an attachment with an advises.