

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

FILED  
Apr 15 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P96000089830 (9)**

1. Corporation Name  
**AESIR MANAGEMENT, INC.**

Principal Place of Business <b>26880 WEDGEWOOD DRIVE UNIT 403 BONITA SPRINGS FL 34134</b>	Mailing Address <b>26880 WEDGEWOOD DRIVE UNIT 403 BONITA SPRINGS FL 34134-2673</b>
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>10/31/1996</b>	3a. Date of Last Report
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
24 Country	29 Country	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 <b>CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324</b>				10. Name and Address of New Registered Agent			
				81 Name <b>CHARLES W. SWAN, JR</b>			
				82 Street Address (P.O. Box Number is Not Acceptable) <b>26880 WEDGEWOOD DRIVE</b>			
				83 <b>UNIT 403</b>			
				84 City <b>BONITA SPRINGS</b> <b>FL</b> 85 Zip Code <b>34134</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 *Charles W. Swan, Jr.* **4-8-97**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	D.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	<b>BECKER, BERNARD</b>			1.2 NAME	<b>MILDRED E. SCHULER</b>		
STREET ADDRESS	<b>345 SPRAGUE ROAD</b>			1.3 STREET ADDRESS	<b>27013 SHELL RIDGE CIRCLE</b>		
CITY-ST-ZIP	<b>NARBETH PA 19072</b>			1.4 CITY-ST-ZIP	<b>BONITA SPRINGS, FL 34134</b>		
TITLE	D	<input checked="" type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>FRENCH, WOODROW W</b>			2.2 NAME			
STREET ADDRESS	<b>5 WOODFIELD COURT</b>			2.3 STREET ADDRESS			
CITY-ST-ZIP	<b>MEDFORD NJ 08055</b>			2.4 CITY-ST-ZIP			
TITLE	D	<input checked="" type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>LAMPLUGH, JOHN</b>			3.2 NAME			
STREET ADDRESS	<b>2 TIMBRE COURT</b>			3.3 STREET ADDRESS			
CITY-ST-ZIP	<b>MEDFORD NJ 08055</b>			3.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>CHARLES W. SWAN, JR.</b>			4.2 NAME			
STREET ADDRESS	<b>26880 WEDGEWOOD DRIVE, UNIT 403</b>			4.3 STREET ADDRESS			
CITY-ST-ZIP	<b>BONITA SPRINGS, FL 34134</b>			4.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>ROBERTA L. MILLER</b>			5.2 NAME			
STREET ADDRESS	<b>116 LAKE JULIA DRIVE NORTH</b>			5.3 STREET ADDRESS			
CITY-ST-ZIP	<b>PONTE VEDRA, FL 32082</b>			5.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>MARJORIE J. BODDREFF</b>			6.2 NAME			
STREET ADDRESS	<b>11 LAKE JULIA DRIVE SOUTH</b>			6.3 STREET ADDRESS			
CITY-ST-ZIP	<b>PONTE VEDRA, FL 32082</b>			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: *Charles W. Swan, Jr.* **4-8-97** **941 4958046**

CR2E034 (9/96)