

**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.)**

15.1

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED

97 AUG -5 PM 3:47

DOCUMENT # P96000090107 (9)

1. Corporation Name
WYLDE THYME HAMMOCK, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business 2861 SHERMAN AVENUE NAPLES FL 34120	Mailing Address 2861 SHERMAN AVENUE NAPLES FL 34120
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/30/1996 81196	3a. Date of Last Report
21 Suite, Apt. #, etc.	22 City & State	23 Zip	24 Country	4. FEI Number 59-3409233	Applied For Not Applicable
25	26	27	28	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
29	30	31	32	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	

MARD, LARS A
2861 SHERMAN AVENUE
NAPLES FL 34120

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
				FL

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D MARD, LARS A	1.2 NAME	
STREET ADDRESS	2861 SHERMAN AVENUE	1.3 STREET ADDRESS	400002262484--1
CITY-ST-ZIP	NAPLES FL 34120	1.4 CITY-ST-ZIP	-08/08/97--01141--025
			***165.00 ***165.00
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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	

400002262484--1
-08/08/97--01141--025
***165.00 ***165.00

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 _____

CR2E034 (4/97)

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7/30/97

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TO DEPT OF STATE

TO MY BEST RECOLLECTION I HAD NEVER RECEIVED MY FIRST NOTICE FOR CORPORATE FILING I HAVE CALLED YOUR OFFICES TODAY, AND WAS TOLD TO SEND IN THE FIRST NOTICE FEE OF ~~165.00~~, WITH A NOTE OF EXPLANATION.

MAYBE I HAVE OVERLOOKED IT, BUT BEING MY FIRST YEAR AS A CORPORATION, I HAVE HAD TO LEARN A LOT VERY FAST. I AM HOPING YOU WILL ACCEPT THE ~~165.00~~ AS MY FILING FEE, AND I WILL CALL IF I DO NOT RECEIVE IT NEXT TIME,

Sincerely
Fred Mead

MRS A MARY PRESIDENT
WYDE TRANE HAMMOCK, INC.