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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997

DOCUMENT # P96000095417 (7)

THE DORSEY GROUP, INC.

Principal Place of Business

Mailing Address

## **FILED** Feb 18 1997 8:00am Secretary of State



100 NE 3RD A FT LAUDERDA		100 NE SRD AVE STE 400 FT LAUDERDALE FL 33301-1155						
				-	3. Date Incorporated or Qualified 11/18/1996	3a. Da	te of Last P	Report
Principal Place of Business     2a. Mailing Address					4. FEI Number		A	pplied For
	oconut Circle	26 354 Coconut Circle			65-0718541		<del></del>	lot Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State Ft. Lauderdale, FL		City & State 28 Ft. Lauderdale, FL			Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
24 33326 25 U.S.A. 29 33326 30 U				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes X No				
	9, Name and Address of Curre	ent Registered Agent	041 11		0. Name and Address of New Re	gistered A	igent	
	INEIDER, LAZ L		81 Nam	ne .:				
	NE 3RD AVE STE 400 LAUDERDALE FL 33301			et Address	(P.O. Box Number is Not Acceptal	ble)		
			83					
			84 City			FL	<b>85</b> Zip	Code
office or r	to the provisions of Sections 607.05 registered agent, or both, in the Station familiar with, and accept the obli	te of Florida. Such change was	s authorized by the co	ed corpora orporation	ition submits this statement for the i 's board of directors. I hereby acce	purpose of pt the appo	changing l	lts registered s registered
SIGNATURE		9						
SIGNATURE	Signature, typed or printed name of registered a	gent and title it applicable. (No	OTE: Registered Agent signal	lure required w	rhen reinstalling)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		-	
TITLE	D	DELETE	1.1 TITLE	D/P		•	<b>Change</b>	Addition
NAME	DORSEY, TIMOTHY		1.2 NAME	Dor	sey, Timothy			
STREE1 ADDRESS	354 COCONUT CIR		1.3 STREET ADDRES	1 324	Coconut Circle			
CITY-ST-ZIP	FT LAUDERDALE FL 33326	[ ] priest	1.4 CITY-ST-ZIP	Ft.	Lauderdale, FL 333	326	Channe	X Addition
TITLE		DELETE	2.1 TITLE	D/S	LT _		Change	LAL MODILION
NAME			2.2 NAME	Dor	sey, Garla			
STREET ADDRESS			2.3 STREET ADDRES	<sup>s</sup>   354	Coconut Circle			
CITY-ST-ZIP TITLE		DELETE	2 4 CITY - ST - ZIP 31 TITLE	Ft	Lauderdale, FL 333	326	Change	Addition
NAME		had Peters	3.2 NAME		·		La orienge	
!			3.3 STREET ADDRES	~				
STREET ADDRESS  CITY-ST-ZIP			3.4. CITY - ST - ZIP	~				
TITLE		DELETE	4.1 TITLE		<u> </u>		Change	Addition
NAME		_	4.2 NAME				•	
STREET ADDRESS			4.3 STREET ADDRES	ss				
City-St-ZiP			4.4 CITY - ST - ZIP					
TITLE	A L. B. L.	DELETE	5.1 TITLE	<del></del>	······································		Change	Addition
NAME		•	5.2 NAME	}				
STREET ADDRESS			5.3 STREET ADDRES	ss				
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
THLE		DELETE	6.1 TITLE				Change	Addition
NAME			6.2 NAME	<b>\</b>				
STREET ADDRESS			6.3 STREET ADDRES	ss				
CITY - ST - ZIP			6.4 CITY-ST-ZIP					
	by cortifu that the information cumple	ind with this filing done not au		n stated in	Section 110 07/2)(i) Florida Statut	or I further	contifu tha	t the

roo receoy certify trial the information supplied with this filling 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.

954 384-9523