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**May 06 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000098892 (8)

1. Corporation Name
THE JAMES BROKERAGE, INC.



Principal Place of Business 1800 EAST ROBINSON STREET SUITE 250 ORLANDO FL 32803	Mailing Address 1800 EAST ROBINSON STREET SUITE 250 ORLANDO FL 32803-5947
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3. Date Incorporated or Qualified 12/04/1996	3a. Date of Last Report
4. FEI Number 59-3440502	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 1600 E. Robinson St.	2a. Mailing Address 26 1600 E. Robinson St.
Suite, Apt. #, etc. 22 250	Suite, Apt. #, etc. 27 250
City & State 23 Orlando, FL	City & State 28 Orlando, FL
Zip 24 32803	Country 25 USA
Zip 29 32803	Country 30 USA

9. Name and Address of Current Registered Agent
**SINGER, DEBORAH E
1800 EAST ROBINSON STREET
SUITE 250
ORLANDO FL 32803**

10. Name and Address of New Registered Agent

81 Name Singer, Deborah E.
82 Street Address (P.O. Box Number is Not Acceptable) 1600 E. Robinson Street
83 Suite 250
84 City Orlando
85 Zip Code FL 32803

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE PTD	<input type="checkbox"/> DELETE
NAME SINGER, DEBORAH E	
STREET ADDRESS 1800 E ROBINSON ST, STE 250	
CITY - ST - ZIP ORLANDO FL 32803	
TITLE S	<input type="checkbox"/> DELETE
NAME SINGER, FRANK	
STREET ADDRESS 1800 E ROBINSON ST, STE 250	
CITY - ST - ZIP ORLANDO FL 32803	
TITLE V	<input type="checkbox"/> DELETE
NAME PATTERSON, MIKE	
STREET ADDRESS 1800 E ROBINSON ST, STE 250	
CITY - ST - ZIP ORLANDO FL 32803	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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***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, changed, or on an attachment with an address.

SIGNATURE: **SINGER, DEBORAH E.** 2/5/97 407-898-9686

CP2E034 (9/96)