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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 16 1998 8:00am Secretary of State

ENGLE	WOOD HOLDINGS, INC.				
Principal Plac	e of Business	Mailing Address		I INDIIADI EIG IBRIE INDIE GOILE EREIT ONIN DOLD	IN MINISTER FOR AND AND THE FORES FOR AND INCIDENT AND
1230 S FEDERAL HIGHWAY		1230 S FEDERAL HIGHWAY		1	
BOYNTON BEACH FL 33435		BOYNTON BEACH FL 33435		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	THO OF THOSE
				06/13/1997	
2. Principal P	face of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-075-789	6 Not Applicable
Suite, Apt.	#, elc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State	o	City & State		6. Election Campaign Financing	\$5.00 May Be
23	Country	28	Country	Trust Fund Contribution	Added to Fees
Zip 24	25	29	30	 This corporation owes or has paid the Personal Property Tax due June 30. 	e current year Intengible
	9. Name and Address of Curre		1901	10. Name and Address of New Registe	
PROVENZANO, JOSEPH M DR.		81 Name			
	SO S FEDERAL HIGHWAY		82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
	YNTON BEACH FL 33435		62 Street Add	ress (F.O. Box Namber is Not Acceptable)	
50	THE DEADNIE 00400		63		
			84 City		. 85 Zip Code
			let City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607,1508, Florida St	atutes, the above-named corp		se of changing its registered
11. Pursuant office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607,1508, Florida St e of Florida Such change w gations of, Section 607,0505	atutes, the above-named corp as authorized by the corpora Florida Statutes.	poration submits this statement for the purpo ition's board of directors. I hereby accept the	se of changing its registered appointment as registered
11. Pursuant office or ragent. La	m familiar with, and accept the oblig	gations of, Section 607.0505	, Florida Statutes.	poration submits this statement for the purpo tion's board of directors. I hereby accept the	
agent. I a SIGNATURE	m familiar with, and accept the oblig	pations of Section 607.0505	, Florida Statutes. (NOTE: Registered Agent signature requi	poration submits this statement for the purpo- tion's board of directors. I hereby accept the fired when reinstating)	.τε
agent. I a SIGNATURE	m familiar with, and accept the oblig Signature bysed or product rance of represent age OFFICERS AN	pations of, Section 607,0505 perform true it apjuicable UP DIRE CTORS	, Florida Statutes. NOTE: Registered Agent signature requi	poration submits this statement for the purpo tion's board of directors. I hereby accept the	TE AND DIRECTORS IN 12
agent. I a SIGNATURE 12. TITLE	m familiar with, and accept the oblig Signature, lipsed or product ranks of registered age OFFICERS AN	pations of, Section 607,0505 pent and the if applicable UD DIRECTORS DELETE	Florida Statutes. (NOTE Registered Agent signature requi	poration submits this statement for the purpo- tion's board of directors. I hereby accept the fired when reinstating)	.τε
agent. I a SIGNATURE 12. TITLE NAME	m familiar with, and accept the oblig Signature based or prefet traine of representing OFFICERS AN D PROVENZANO, JOSEPH M D	pations of, Section 607,0505 pent and the if applicable UD DIRECTORS DELETE	Florida Statutes. (NOTE Registered Agent signature requi 13. 1.1 TIFLE 1.2 NAME	poration submits this statement for the purpo- tion's board of directors. I hereby accept the fired when reinstating)	TE AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	m familiar with, and accept the oblig Signature, breed or prefet traine of represent ap OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY	pations of, Section 607,0505 pent and to set applicable UD DIRI CTORS DELETE DR.	Florida Statutes. (NOTE Registered Agent signature requisits and the state of the	poration submits this statement for the purpo- tion's board of directors. I hereby accept the fired when reinstating)	TE AND DIRECTORS IN 12
agent. I a SIGNATURE 12. TITLE NAME	m familiar with, and accept the oblig Signature based or prefet traine of representing OFFICERS AN D PROVENZANO, JOSEPH M D	pations of, Section 607,0505 pent and to set applicable UD DIRI CTORS DELETE DR.	Florida Statutes. (NOTE Registered Agent signature requi 13. 1.1 TIFLE 1.2 NAME	poration submits this statement for the purpo- tion's board of directors. I hereby accept the fired when reinstating)	TE AND DIRECTORS IN 12
BOONT I A SIGNATURE 12. 1ITLE NAME STREET ADDRESS CITY-SI-ZIP	of Froi Name of the oblig of the oblig of the oblig of Froi Name of the oblig of PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D	pations of, Section 607,0505 pent and tree if applicable UD DIRECTORS DELETE DR.	Florida Statutes. (NOTE Registered Agent signature requisits	poration submits this statement for the purpo- tion's board of directors. I hereby accept the fired when reinstating)	AND DIRECTORS IN 12 Change
BOOM I A SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	of Friedrich and accept the oblig Signature, lyted or prefet have of representing OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR.	pations of, Section 607,0505 pent and tree if applicable UD DIRECTORS DELETE DR.	Florida Statutes. INOTE Registered Agent signature requi 13. 1.1 TIFLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE	poration submits this statement for the purpo- tion's board of directors. I hereby accept the fired when reinstating)	AND DIRECTORS IN 12 Change
BY B	of familiar with, and accept the oblig OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR. 1230 S FEDERAL HIGHWAY	pations of, Section 607,0505 ped and the it applicable	Florida Statutes. INOTE Registered Agent signature requi 13. 1.1 TIFLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME	poration submits this statement for the purpo- tion's board of directors. I hereby accept the fired when reinstating)	AND DIRECTORS IN 12 Change
Agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	of Friedrich and accept the oblig Signature, lyted or prefet have of representing OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR.	pations of, Section 607,0505 ped and the it applicable	Florida Statutes. 13. 1.1 TIPLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIPLE 2.2 NAME 2.3 STREET ADDRESS	poration submits this statement for the purpo tition's board of directors. I hereby accept the fred when reinstaing) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change
AGONT LA SIGNATURE 12. TITLE NAME STREE1 ADDRESS CITY-S1-ZIP TITLE NAME STREE1 ADDRESS CITY-S7-ZIP	of familiar with, and accept the oblig OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR. 1230 S FEDERAL HIGHWAY	pations of, Section 607,0505 ped and the it applicable	Florida Statutes. INOTE Registered Agent signature requi 13. 1.1 TIFLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	poration submits this statement for the purpo tition's board of directors. I hereby accept the fred when reinstaing) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition
AGONT LA SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	of familiar with, and accept the oblig OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR. 1230 S FEDERAL HIGHWAY	pations of, Section 607,0505 ped and the it applicable	Florida Statutes. 13. 1.1 TIPLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIPLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	poration submits this statement for the purpo tition's board of directors. I hereby accept the fred when reinstaing) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition
BY B	of familiar with, and accept the oblig OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR. 1230 S FEDERAL HIGHWAY	pations of, Section 607,0505 ped and the it applicable UP DIRECTORS DELETE DELETE DELETE	Florida Statutes. 13. 1.1 TIPLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIPLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TIPLE 3.2 NAME	poration submits this statement for the purpo tition's board of directors. I hereby accept the fred when reinstaing) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Addition
BY STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	of familiar with, and accept the oblig OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR. 1230 S FEDERAL HIGHWAY	pations of, Section 607,0505 ped and the it applicable	Floricia Statutes. 13. 1.1 TIPLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIPLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TIPLE 3.2 NAME 3.3 STREET ADDRESS	poration submits this statement for the purpo tition's board of directors. I hereby accept the fred when reinstaing) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition
BY B	of familiar with, and accept the oblig OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR. 1230 S FEDERAL HIGHWAY	pations of, Section 607,0505 ped and the it applicable UP DIRECTORS DELETE DELETE DELETE	Florida Statutes. 13. 1.1 TIPLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIPLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	poration submits this statement for the purpo tition's board of directors. I hereby accept the fred when reinstaing) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Addition
BY B	of familiar with, and accept the oblig OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR. 1230 S FEDERAL HIGHWAY	pations of, Section 607,0505 ped and the it applicable UP DIRECTORS DELETE DELETE DELETE	Floricia Statutes. 13. 1.1 Tifle 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TIFLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TIFLE	poration submits this statement for the purpo tition's board of directors. I hereby accept the fred when reinstaing) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Addition
BY STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	of familiar with, and accept the oblig OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR. 1230 S FEDERAL HIGHWAY	pations of, Section 607,0505 grad and the of applicable JD DIRECTORS DELETE DELETE DELETE	Floricia Statutes. 13. 1.1 TIPLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIPLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TIPLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TIPLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TIPLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	poration submits this statement for the purpo tition's board of directors. I hereby accept the fred when reinstaing) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition
AGONT LA SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	of familiar with, and accept the oblig OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR. 1230 S FEDERAL HIGHWAY	pations of, Section 607,0505 ped and the it applicable UP DIRECTORS DELETE DELETE DELETE	Floricia Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	poration submits this statement for the purpo tition's board of directors. I hereby accept the fred when reinstaing) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Addition
AGONT LA SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	of familiar with, and accept the oblig OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR. 1230 S FEDERAL HIGHWAY	pations of, Section 607,0505 grad and the of applicable JD DIRECTORS DELETE DELETE DELETE	Floricia Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	poration submits this statement for the purpo tition's board of directors. I hereby accept the fred when reinstaing) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition
BY STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	of familiar with, and accept the oblig OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR. 1230 S FEDERAL HIGHWAY	pations of, Section 607,0505 grad and the of applicable JD DIRECTORS DELETE DELETE DELETE	FIORICIA STATUTES. INOTE Propistered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	poration submits this statement for the purpo tition's board of directors. I hereby accept the fred when reinstaing) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition
BY STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	of familiar with, and accept the oblig OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR. 1230 S FEDERAL HIGHWAY	Applications of, Section 607,0505 Applications of applicable Applications Delete Delete Delete Delete Delete Delete	Floricia Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	poration submits this statement for the purpo tition's board of directors. I hereby accept the fred when reinstaing) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition Change Addition
BY STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	of familiar with, and accept the oblig OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR. 1230 S FEDERAL HIGHWAY	pations of, Section 607,0505 grad and the of applicable JD DIRECTORS DELETE DELETE DELETE	Floricia Statutes. 13. 1.1 TIPLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIPLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TIPLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TIPLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TIPLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TIPLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TIPLE	poration submits this statement for the purpo tition's board of directors. I hereby accept the fred when reinstaing) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition
BY B	of familiar with, and accept the oblig OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR. 1230 S FEDERAL HIGHWAY	Applications of, Section 607,0505 Applications of applicable Applications Delete Delete Delete Delete Delete Delete	FIORICIA STATUTOS. INOTE Propistered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	poration submits this statement for the purpo tition's board of directors. I hereby accept the fred when reinstaing) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition Change Addition
BY STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	of familiar with, and accept the oblig OFFICE RS AN D PROVENZANO, JOSEPH M D 1230 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 D SHAPSE, WILLIAM A DR. 1230 S FEDERAL HIGHWAY	Applications of, Section 607,0505 Applications of applicable Applications Delete Delete Delete Delete Delete Delete	Floricia Statutes. 13. 1.1 TIPLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIPLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TIPLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TIPLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TIPLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TIPLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TIPLE	poration submits this statement for the purpo tition's board of directors. I hereby accept the fred when reinstaing) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition Change Addition

Block 12 or Block 13 if changed, or on an attachment with

SIGNATURE:

Joseph M Provisiona 2/9/58 5/36 0015