

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

**FILED**  
**May 14 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

**DOCUMENT # S27357 (0)**

1. Corporation Name  
**HWH PROPERTIES-PALM BEACH, INC.**



Principal Place of Business <b>200 EAST LAS OLAS BLVD.                  SUITE 1420                  FORT LAUDERDALE FL 33301</b>	Mailing Address <b>200 EAST LAS OLAS BLVD.                  SUITE 1420                  FORT LAUDERDALE FL 33301-2248</b>
---	--

3. Date Incorporated or Qualified <b>01/25/1991</b>	3a. Date of Last Report <b>05/01/1996</b>
--	--

2. Principal Place of Business	2a. Mailing Address	4. FEI Number <b>65-0237972</b>	Applied For <input type="checkbox"/> Not Applicable
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
22. City & State	27. City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
23. Zip	28. Zip	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
24. Country	29. Country		

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
<b>HUDSON, HARRIS W.                  200 EAST LAS OLAS BLVD.                  SUITE 1420                  FORT LAUDERDALE FL 33301</b>		B1 Name	
		B2 Street Address (P.O. Box Number is Not Acceptable)	
		B3	
		B4 City	<b>FL</b> B5 Zip Code

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HUDSON, HARRIS W.</b>	1.2 NAME	
STREET ADDRESS	<b>200 E. LAS OLAS BLVD.</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>FORT LAUDERDALE FL</b>	1.4 CITY - ST - ZIP	
TITLE	<b>VP</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HUDSON, STEVEN W.</b>	2.2 NAME	
STREET ADDRESS	<b>200 EAST LAS OLAS BLVD SUITE 1400</b>	2.3 STREET ADDRESS	
CITY - ST - ZIP	<b>FT LAUDERDALE FL</b>	2.4 CITY - ST - ZIP	
TITLE	<b>ST</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>WRIGHT, PETER W.</b>	3.2 NAME	
STREET ADDRESS	<b>200 EAST LAS OLAS BLVD SUITE 1400</b>	3.3 STREET ADDRESS	
CITY - ST - ZIP	<b>FT LAUDERDALE FL</b>	3.4 CITY - ST - ZIP	
TITLE		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		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		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	

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: *Peter W Wright* Date: **4-28-97** Daytime Phone #: **954-713-5245**

CFR2E034 (9/96)

**HWH Properties-Palm Beach, Inc.**

<u>OFFICE</u>	<u>NAME</u>
Director .....	Harris W. Hudson
President .....	Harris W. Hudson
Vice President .....	Steven W. Hudson
Secretary .....	Peter W. Wright
Treasurer .....	Peter W. Wright

Mailing Address for all officers and director: 450 East Las Olas Blvd.  
Suite 1200  
Fort Lauderdale, FL 33301