

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # S53239 (7)

1. Corporation Name
F.C.F., INC.



Principal Place of Business
5605 S. DIXIE HWY.
WEST PALM BEACH FL 33405
US

Mailing Address
255 PILGRIM RD.
WEST PALM BEACH FL 33405
US

3. Date Incorporated or Qualified 05/15/1991	3a. Date of Last Report 05/01/1995
4. FEI Number 65-0261501	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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 255 Pilgrim Rd 22 Suite, Apt. #, etc. 23 City & State WEST Palm Bch, FL 24 Zip 33405 25 Country Palm Bch	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent
HOTZ, FRANK E., III
207 EDGEWOOD DR
WEST PALM BEACH FL 33405

10. Name and Address of New Registered Agent
81 Name
FRANK E HOTZ III
82 Street Address (P.O. Box Number is Not Acceptable)
1842 17th Ct. N.
83
84 City
LAKE NORTH
85 Zip Code
FL 33460

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 board of directors (NOT: Registered Agent signature required when incorporating)

12. OFFICERS AND DIRECTORS	
TITLE	D
NAME	HOTZ, FRANK E., III
STREET ADDRESS	207 EDGEWOOD DR
CITY - ST - ZIP	WEST PALM BEACH FL 33405
TITLE	D
NAME	BERGERSON, CHRISTINE C.
STREET ADDRESS	255 PILGRIM RD
CITY - ST - ZIP	WEST PALM BEACH FL
TITLE	D
NAME	HOTZ, FRANK E., JR.
STREET ADDRESS	251 PILGRIM RD
CITY - ST - ZIP	WEST PALM BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	D
1.2 NAME	FRANK E HOTZ III
1.3 STREET ADDRESS	1842 17th Ct. N
1.4 CITY - ST - ZIP	LAKE NORTH, FL 33460
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	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Frank E. Hotz III 4-28-96 (407) 585-8788
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day, Month, Year

CR2E034 (12/95)