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Feb 03 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **S55913** (5)

1. Corporation Name
DEBTONE INC.



Principal Place of Business
**474 WASHINGTON COURT
FORT MYERS BEACH FL 33931**

Mailing Address
**474 WASHINGTON COURT
FORT MYERS BEACH FL 33931-3734**

3. Date Incorporated or Qualified 05/28/1991	3a. Date of Last Report 03/28/1996
4. FEI Number 65-0266143	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	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

**DUBE', ANTHONY C.
474 WASHINGTON CT.
FORT MYERS BEACH FL 33931**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 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	<input type="checkbox"/> DELETE	11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURPHY, DEBRA	12 NAME	MURPHY, DEBRA
STREET ADDRESS	474 WASHINGTON COURT	13 STREET ADDRESS	474 WASHINGTON CT.
CITY-ST-ZIP	FT. MYERS BEACH FL	14 CITY-ST-ZIP	FT. MYERS BEACH, FL.
TITLE	<input type="checkbox"/> DELETE	21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUBE, ANTHONY C.	22 NAME	DUBE', ANTHONY
STREET ADDRESS	474 WASHINGTON COURT	23 STREET ADDRESS	474 WASHINGTON CT.
CITY-ST-ZIP	FT. MYERS BEACH FL	24 CITY-ST-ZIP	FT. MYERS BEACH, FLA.
TITLE	<input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		32 NAME	V.P. TIEDT, WARREN M.
STREET ADDRESS		33 STREET ADDRESS	474 WASHINGTON CT.
CITY-ST-ZIP		34 CITY-ST-ZIP	FT. MYERS BEACH, FL.
TITLE	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		42 NAME	C-T DUBE'DORIS
STREET ADDRESS		43 STREET ADDRESS	474 WASHINGTON CT.
CITY-ST-ZIP		44 CITY-ST-ZIP	FT. MYERS BEACH, FL.
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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: **DORIS DUBE'** 1-27-97 (941) 463-0519
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)