

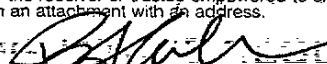


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # S73759 (0) 1. Corporation Name CARLSON-VAN DORSTEN COMPANY					
Principal Place of Business 9123 N. MILITARY TRAIL SUITE 216 PALM BEACH GARDENS FL 33410			Mailing Address 9123 N. MILITARY TRAIL SUITE 216 PALM BEACH GARDENS FL 33410		
2. Principal Place of Business 21 2500 BANCHORY Rd. Suite, Apt. #, etc. 22 City & State 23 WINTER PARK, FL Zip 24 32792 Country 25 USA		2a. Mailing Address 26 2500 BANCHORY Rd. Suite, Apt. #, etc. 27 City & State 28 WINTER PARK, FL Zip 29 32792 Country 30 USA		3. Date Incorporated or Qualified 07/29/1991 4. FEI Number 59-3079429 Applied For Not Applicable 5. Certificate of Status Desired <input checked="" 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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
g. Name and Address of Current Registered Agent CARLSON, ROBERT M. 9123 N. MILITARY TRAIL SUITE 216 PALM BEACH GARDENS FL 33410			10. Name and Address of New Registered Agent 81 Name BRIAN A. CARLSON 82 Street Address (P.O. Box Number is Not Acceptable) 2500 BANCHORY Rd. 83 84 City WINTER PARK FL 85 Zip Code 32792		
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 1-27-98 (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP PRES CARLSON, ROBERT 9123 N. MILITARY TRAIL PALM BEACH GARDENS FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 PRESIDENT 1.2 NAME BRIAN A. CARLSON 1.3 STREET ADDRESS 2500 BANCHORY Rd. 1.4 CITY-ST-ZIP WINTER PARK, FL 32792 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 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:  REQUIRED 1-27-98 (407) 740-7511					



DO NOT WRITE IN THIS SPACE

CR2E034 (10/97)