

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

FILED

Apr 14 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 # S76741 (5)

1. Corporation Name
PARADISE DEVELOPMENT GROUP, INC.

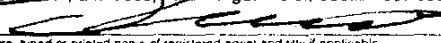
Principal Place of Business 1711-A S 10TH ST SAFETY HARBOR FL 34695 US	Mailing Address 34650 US HWY 19 NORTH STE 307 PALM HARBOR FL 34684 US
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2901 Rigsby Lane Suite, Apt. #, etc.	2a. Mailing Address 26 2901 Rigsby Lane Suite, Apt. #, etc.	3. Date Incorporated or Qualified 08/29/1991
22 City & State 23 Safety Harbor, FL 24 Zip 34695 25 Country USA	27 City & State 28 Safety Harbor, FL 29 Zip 34695 30 Country USA	4. FEI Number 59-3081656 Applied For Not Applicable
9. Name and Address of Current Registered Agent STROSS, HOWARD C. 34650 US HWY 19 NORTH STE 307 PALM HARBOR FL 34684		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

10. Name and Address of New Registered Agent 81 Name ROBERT A. FORLIZZO 82 Street Address (P.O. Box Number is Not Acceptable) 13577 Feather Sound Dr. # 300 83 Feather Sound Corp. Ctr. II 84 City Clearwater FL 85 Zip Code 33762-2258
--

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 
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/1/98
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	P;D;
NAME	CONNOR, MICHAEL P.	1.2 NAME	Michael P. Connor
STREET ADDRESS	1171-A S. 10TH ST	1.3 STREET ADDRESS	2901 Rigsby Lane
CITY-ST-ZIP	SAFETY HARBOR FL	1.4 CITY-ST-ZIP	Safety Harbor, FL 34695
TITLE	STV	2.1 TITLE	S;T;EVP;D
NAME	KIDMAN, GEORGE K.	2.2 NAME	George K. Kidman
STREET ADDRESS	1171-A S 10TH ST	2.3 STREET ADDRESS	2901 Rigsby Lane
CITY-ST-ZIP	SAFETY HARBOR FL	2.4 CITY-ST-ZIP	Safety Harbor, FL 34695
TITLE	D	3.1 TITLE	VP
NAME	KIDMAN, GEORGE K.	3.2 NAME	Robert Hoffman
STREET ADDRESS	1711-A S 10TH ST	3.3 STREET ADDRESS	3350 Cumberland Circle #1590
CITY-ST-ZIP	SAFETY HARBOR FL	3.4 CITY-ST-ZIP	Atlanta, GA 30339
TITLE		4.1 TITLE	VP
NAME		4.2 NAME	Scott Torrie
STREET ADDRESS		4.3 STREET ADDRESS	2901 Rigsby Lane
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Safety Harbor, FL 34695
TITLE		5.1 TITLE	Asst. Sec.
NAME		5.2 NAME	Teresa L. Duncan
STREET ADDRESS		5.3 STREET ADDRESS	2901 Rigsby Lane
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Safety Harbor, FL 34695
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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:

 SCOTT TORRIE VICE PRESIDENT

3-21-98 (913) 726-1115
Date Daytime Phone # 0480427

CR2E034 (10/97)