

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

FILED

Apr 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S84261 (4)

1. Corporation Name
BDC CENTER HOLDINGS, INC.



Principal Place of Business 401 W. COLONIAL DR STE 7 ORLANDO FL 32804 US	Mailing Address 401 W. COLONIAL DR STE 7 ORLANDO FL 32804-6829 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 10/02/1991	3a. Date of Last Report 05/25/1996
4. FEI Number 59-3087431	Applied For 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	

9. Name and Address of Current Registered Agent ALLEN, THOMAS R 340 N ORANGE AVE SUITE 1300 ORLANDO FL 32802
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10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
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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 William H. MacArthur (NOTE: Registered Agent signature required when reinstating) DATE 4/21/97

12. OFFICERS AND DIRECTORS	
TITLE	DPST
NAME	MACARTHUR, WILLIAM H
STREET ADDRESS	401 W. COLONIAL DR, STE 7
CITY-ST-ZIP	ORLANDO FL
TITLE	V
NAME	VON KLUGE, HERBERT
STREET ADDRESS	401 W. COLONIAL DR, STE 7
CITY-ST-ZIP	ORLANDO FL
TITLE	V
NAME	MACARTHUR, LUZ T
STREET ADDRESS	401 W. COLONIAL DR, STE 7
CITY-ST-ZIP	ORLANDO FL
TITLE	V
NAME	PARIS, DANIEL W
STREET ADDRESS	401 W. COLONIAL DR, STE. 7
CITY-ST-ZIP	ORLANDO FL
TITLE	AST
NAME	CRENSHAW, JAMES L.
STREET ADDRESS	401 W. COLONIAL DR, STE 7
CITY-ST-ZIP	ORLANDO FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	AST
5.3 STREET ADDRESS	LIE CONANT
5.4 CITY-ST-ZIP	401 W. COLONIAL DR, STE 7 ORLANDO, FL 32804
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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: William H. MacArthur DATE 4/21/97 DAYTIME PHONE # (407) 425-8076

CR2E034 (9/96)