

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **S87343** (7)

1. Corporation Name

SIRGANY ORLANDO LANDSIDE PARTNER, INC.



Principal Place of Business

225 E. ROBINSON STREET
SUITE 600
ORLANDO FL 32801-4325

Mailing Address

225 E. ROBINSON STREET
SUITE 600
ORLANDO FL 32801-4325

2. Principal Place of Business

2a. Mailing Address

21. State, Apt. #, etc.

26. State, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24. Zip

Country

29. Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BECHTEL, STEVEN R.
225 E. ROBINSON STREET
SUITE 600
ORLANDO FL 32802

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 607.1505, 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 of the corporation or its registered agent, or both (delete)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D
KAYAL, RAYMOND J.
6910 N.W. 12TH STREET
MIAMI FL

DELETE

1.1 TITLE

Change Addition

NAME

1.2 NAME

STREET ADDRESS

1.3 STREET ADDRESS

CITY- ST- ZIP

1.4 CITY- ST- ZIP

TITLE

2.1 TITLE

Change Addition

NAME

2.2 NAME

STREET ADDRESS

2.3 STREET ADDRESS

CITY- ST- ZIP

2.4 CITY- ST- ZIP

TITLE

3.1 TITLE

Change Addition

NAME

3.2 NAME

STREET ADDRESS

3.3 STREET ADDRESS

CITY- ST- ZIP

3.4 CITY- ST- ZIP

TITLE

4.1 TITLE

Change Addition

NAME

4.2 NAME

STREET ADDRESS

4.3 STREET ADDRESS

CITY- ST- ZIP

4.4 CITY- ST- ZIP

TITLE

5.1 TITLE

Change Addition

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY- ST- ZIP

5.4 CITY- ST- ZIP

TITLE

6.1 TITLE

Change Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY- ST- ZIP

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:

Raymond J. Kayal
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/96 (205) 594-5754
Date Daytime Phone #

CR2E034 (12/95)