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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

- (

FILED Apr 24 1997 8:00am Secretary of State



DOCUI 1. Corporation	1997 MENT # S9729	DIVISION	cretary of State I OF CORPORATIONS	Secreta	ary of State
	ES PROPERTIES, INC.	Mailing Addross			
Principal Place of Business 1031 W. MORSE BLVD. SUITE 200 WINTER PARK FL 82789		Mailing Address % 1031 W. Morse BLVD. SUITE 290 WINTER PARK FL 32789			
				3. Date Incorporated or Qualified 12/02/1991	04/03/1996
2. Principal Pi 21	lace of Business	2a. Mailing Address	i	4. FEI Number 59-3099116	Applied For Not Applica
Sulte, Apt.	#, etc.	Suite, Apt. #, et	o	Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State	Ð	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Ζιρ	Country	8. This corporation has liability for in	ntangible tax under s. 199.032
24	25	29	[30]		Yes No
HAD	9. Name and Address of Curre	ent Hegistered Agent	81 Name	10. Name and Address of New Reg	Jisterea Agent
	I W MORSE BLVD			Iress (P.O. Box Number is Not Acceptable	۵)
STE 290			82 Street Add	iress (P.O. Box Number is Not Acceptable	e)
	TER PK FL 32789		83		
			84 City		85 Zip Code
44 Durawant	to the provisions of Continue 607.05	00 and 607 1609 Florida	Ptotulos the shows population	poration submits this platement for the su	FL 3 2.0 Code
•	m familiar with, and accept the obli	te of Florida, Such change gations of, Section 607.056	was authorized by the corpora 5, Florida Statutes.	poration submits this statement for the pu alion's board of directors. I hereby accep	t the appointment as registere
SIGNATURE	Signature, lyped or printed name of registered as	gent and title if applicable ND DIRECTORS	(NOTE: Registered Agent signature requ		DATE ERS AND DIRECTORS IN 12
SIGNATURE	Signature, typed or printed name of registered at OFFICERS AI	gool and little if applicable	(NOTE: Registered Agent signature requ	rired when reinstaling)	DATE
SIGNATURE 12, TITLE	OFFICERS AND PERIVOLARIS, GEORGE % 1031 W. MORSE BLVD.	gent and title if applicable ND DIRECTORS	(NOTE: Registered Agent signature requirements) 13. E 1.1 TITLE	rired when reinstaling)	DATE ERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND OFFIC	gent and little if applicable NO DIRECTORS DELET	(NOTE: Registered Agent signature requirements) 13. E 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 City-St-Zip	rired when reinstaling)	DATE ERS AND DIRECTORS IN 12 Change Add
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(40) (41-2777