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Jan 16 1997 8:00am

Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # S98372 (3) 1. Corporation Name ALEXANDER PALMS COURT, INC.



Principal Place of Business: 715 SOUTH STREET KEY WEST FL 33040 US; Mailing Address: 715 SOUTH STREET KEY WEST FL 33040-4788 US

3. Date Incorporated or Qualified: 12/06/1991; 3a. Date of Last Report: 08/14/1996; 4. FEI Number: 65-0354201; 5. Certificate of Status Desired: \$8.75 Additional Fee Required; 6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees; 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21-24); 2a. Mailing Address (26-30); 22. Suite, Apt. #, etc.; 27. Suite, Apt. #, etc.; 23. City & State; 28. City & State; 24. Zip; 25. Country; 29. Zip; 30. Country

9. Name and Address of Current Registered Agent: STRICKLAND, RANDY 628 FLEMING STREET KEY WEST FL 33040; 10. Name and Address of New Registered Agent: RANDY STRICKLAND 715 SOUTH ST KEY WEST FL 33040

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] DATE: 1/9/97

12. OFFICERS AND DIRECTORS: PD STRICKLAND, RANDY 301 NW 93 AVENUE CORAL SPRINGS FL; VST FINNEGAN, JAMES A 301 NW 93 AVENUE CORAL SPRINGS FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP, 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 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: [Signature] DATE: 1/9/97

CR2E034 (9/96)