

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

FILED

Apr 10 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT #** V15548  
 1. Corporation Name  
**GALAXY ASSOCIATES INCORPORATED**

Principal Place of Business 1 WEST POINT DRIVE COCOA BEACH FLORIDA 32931	Mailing Address 1 WEST POINT DR COCOA BEACH FL 32931
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2. Principal Place of Business 21 <b>COCOA BEACH FL</b> Suite, Apt. #, etc.		2a. Mailing Address 26 <b>same</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>02-1992</b>	3a. Date of Last Report <b>APR 1995</b>
22 City & State		27 City & State		4. FEI Number <b>593111041</b>	Applied For Not Applicable
23 Zip		28 Country		5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
24		29		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
25		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**JANET DURBIN**  
**224 JABLO AVE**  
**COCOA FL 32927**

10. Name and Address of New Registered Agent

81 Name <b>JANET DURBIN</b>	85 Zip Code <b>32927</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>224 JABLO AVE</b>	
83 City <b>COCOA</b>	
84 State <b>FL</b>	

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 Janet Durbin DATE **04-03-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PRESIDENT</b>	<input checked="" type="checkbox"/> DELETE	1.1 TITLE <b>PRESIDENT/Finance Officer</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>DORINDA L. ENGLAND</b>		1.2 NAME <b>DORINDA L. LOWERY (P, V, S)</b>	
STREET ADDRESS <b>1 WEST POINT DRIVE</b>		1.3 STREET ADDRESS <b>1 WEST POINT DR</b>	
CITY-ST-ZIP <b>COCOA BEACH, FL 32931</b>		1.4 CITY-ST-ZIP <b>COCOA BEACH, FL 32931</b>	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE <b>SECRETARY/Treasurer (S;T;D)</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME <b>Kevin R. England</b>	
STREET ADDRESS		2.3 STREET ADDRESS <b>1 WEST POINT DR</b>	
CITY-ST-ZIP		2.4 CITY-ST-ZIP <b>COCOA BEACH, FL 32931</b>	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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: Dorinda L. Lowery PRESIDENT DATE **Apr 3, 1997** DAYTIME PHONE # **407-284-3130**

CR2E034 (9/96)