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Apr 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # V21158 (3)

1. Corporation Name
EDWARD T. BYRD & COMPANY



Principal Place of Business: 800 SOUTH ORANGE AVE, 2210, ORLANDO FL 32801, US
Mailing Address: PO BOX 2391, 2210, ORLANDO FL 32802-2391, US

3. Date Incorporated or Qualified: 03/12/1992
3a. Date of Last Report: 04/19/1996
4. FEI Number: 59-3110305
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) and 2a. Mailing Address (26-30) details including Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES OF CENTRAL FLA INC.
360 NORTH ORANGE AVE
SUITE 1100
ORLANDO FL 32810

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

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 typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	DPT	<input type="checkbox"/> DELETE
NAME	BYRD, EDWARD T.	
STREET ADDRESS	200 SOUTH ORANGE AVE, STE 2210	
CITY - ST - ZIP	ORLANDO FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	BYERS, THOMAS A.	
STREET ADDRESS	200 SOUTH ORANGE AVENUE, STE 2210	
CITY - ST - ZIP	ORLANDO FL	
TITLE	AVPS	<input type="checkbox"/> DELETE
NAME	SOUTHARD, JUDITH A.	
STREET ADDRESS	200 SOUTH ORANGE AVE, STE 2210	
CITY - ST - ZIP	ORLANDO FL	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	CHAMBERLIN, JANIS A.	
STREET ADDRESS	200 SOUTH ORANGE AVE, STE 2210	
CITY - ST - ZIP	ORLANDO FL	
TITLE	SVP	<input type="checkbox"/> DELETE
NAME	DAVID J PATTEN	
STREET ADDRESS	200 SOUTH ORANGE AVENUE, SUITE 2210	
CITY - ST - ZIP	ORLANDO FL	
TITLE		<input type="checkbox"/> DELETE
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 type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	VP Noonan, John P.
6.3 STREET ADDRESS	200 South Orange Ave, Ste 2210
6.4 CITY - ST - ZIP	Orlando FL 32801

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, unchanged, or on an attachment with an address.

SIGNATURE: Edward T. Byrd 4/4/97 407.426.8868
DATE: 4/4/97 DAYTIME PHONE: 407.426.8868

CR2E034 (9/96)