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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V29196

(5)

LORD CULTURAL RESOURCES PLANNING & MANAGEMENT IN

Principa! Place of Business Mailing Address 2000 GLADES ROAD 2000 GLADES ROAD SUITE 4000 SUITE 4000 **BOCA RATON FL 33431 BOCA RATON FL 33431-8504** 3. Date Incorporated or Qualified 3a, Date of Last Report 04/16/1992 03/13/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0329823 26 Not Applicable 21 Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing m Added to Fees 23 28 Trust Fund Contribution Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HRAWG CORP. 2000 GLADES ROAD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 400 83 **BOCA RATON FL 33431** 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 printer name of registered agent and title if appricable (NOTE: Registered Agent signature required when reinstating) (96/6) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DP DELETE Change Addition Title 1.1 TITLE LORD, GAIL DEXTER NAME: 12 NAME CR2E034 164 DAVENPORT RO. 164 AVENPORT RD. STREET ADDRESS 1.3 STREET ADDRESS TORONTO ON 1.4 City-ST-ZIP CITY - \$1 - ZIF DELETE Change Addition THE DVPS 2.1 TITLE LORD, BARRY NAME 2.2 NAME 164 DAVENPORT RD. STREET ADORESS 2 3 STREET ADDRESS TORONTO ON 2 4 CITY-ST-ZIP CITY-ST-ZIP Change DVP DELETE Addition TITLE 31 TITLE NICKS, JOHN NAME 3.2 NAME 164 DAVENPORT RD. STREET ADDRESS 3.3 STREET ADDRESS TORONTO ON CITY-ST-Zif 3.4. CITY - ST-ZIP ___ DELETE Addition 4.1 TITLE Change TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY -ST - ZIF 4.4 CHY-ST-ZIP DELETE Addition TITLE 51 TITLE Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADORESS 5.4 CITY-ST-ZIP CITY - ST. 7IP DELETE Addition THILE 6.1 TITLE Change NAME 6.2 NAME

SIGNATURE:

appears in Block 12 or Block

STREET ADDRESS

CHY-ST-ZIP

MURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECT

Gail Dexter Lord, Pres.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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

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

Feb 14/97

FILED

Mar 05 1997 8:00am

Secretary of State

928-9292