


FILED

Jan 30 1998 8:00am
Secretary of State

<p>PROFIT CORPORATION ANNUAL REPORT 1998</p>		<p>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</p>
<p>DOCUMENT # V30073 (3)</p>		
<p>1. Corporation Name CENTRAL GENERAL PARTNERS I, INC.</p>		

Principal Place of Business	Mailing Address
201 S. AMELIA AVENUE SUITE B-3 DELAND FL 32724	201 S. AMELIA AVENUE SUITE B-3 DELAND FL 32724

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

9. Name and Address of Current Registered Agent		
ROBERT A. GUIRLINGER 201 S. AMELIA AVE. SUITE B-3 DELAND FL 32724	81	Name
	82	Street Address
	83	
	84	City

DO NOT WRITE IN THIS SPACE		
3. Date Incorporated or Qualified 04/17/1992		
4. FEI Number 59-3116971	Applied For	
	Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75	Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00	May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	
NAME	LITZELFELNER, GLENDA V.	1.2 NAME	
STREET ADDRESS	201 S. AMELIA AVE B-3	1.3 STREET ADDRESS	
CITY - ST - ZIP	DELAND FL	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	
NAME	GUIRLINGER, ROBERT A.	2.2 NAME	
STREET ADDRESS	201 S. AMELIA AVE B-3	2.3 STREET ADDRESS	
CITY - ST - ZIP	DELAND FL	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I 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 REQUIRED~~ *Charles E. Guichard - President 1/6/98 738-6512* (104)

CB2F034 (10/97)