

512 97 B-6899 C
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V54991 (7)

1. Corporation Name
THE DESOTO INVESTMENT GROUP, INC.

Principal Place of Business
5164 S. FLORIDA AVE.
INVERNESS FL 34450

Mailing Address
5164 S. FLORIDA AVE.
INVERNESS FL 34450-8536



3. Date Incorporated or Qualified 07/30/1992
3a. Date of Last Report 01/12/1996

21. Principal Place of Business 21 2907 Bay to Bay Blvd. Suite, Apt. #, etc. 22 Suite 200 City & State 23 Tampa, FL Zip 24 33629	2a. Mailing Address 26 2907 Bay to Bay Blvd. Suite, Apt. #, etc. 27 Suite 200 City & State 28 Tampa, FL Zip 29 33629	Country 30 Hillsborough
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4. FEI Number 59-3172017	Applied For Not Applicable
5. Certificate of Status Desired <input 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 has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
OLIVIER, JACQUES
650 E. DAKOTA CT.
HERNANDO FL 34442

10. Name and Address of New Registered Agent
81 Name
W. Andrew Krusen, Jr.
82 Street Address (P.O. Box Number Is Not Acceptable)
2907 Bay to Bay Blvd., Suite 200
83
84 City
Tampa
85 Zip Code
FL 33629

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 *W. Andrew Krusen, Jr.* April 30, 1997
(NOTE: Registered Agent signature required when reinstalling)

12. OFFICERS AND DIRECTORS

TITLE	PD	DELETE <input checked="" type="checkbox"/>
NAME	OLIVIER, JACQUES	
STREET ADDRESS	650 E DAKOTA CT	
CITY-ST-ZIP	HERNANDO FL	
TITLE	V	DELETE <input checked="" type="checkbox"/>
NAME	OLIVIER, SOPHIE I	
STREET ADDRESS	18 RUE DE LA RISLE	
CITY-ST-ZIP	70200 MANTES-LA-VILLE FRANCE	
TITLE		DELETE <input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE <input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE <input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D/P	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
1.2 NAME	W. Andrew Krusen, Jr.	
1.3 STREET ADDRESS	2907 Bay to Bay Blvd., Suite 200	
1.4 CITY-ST-ZIP	Tampa, FL 33629	
2.1 TITLE	V/S/T	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
2.2 NAME	Cynthia Kimsey	
2.3 STREET ADDRESS	2907 Bay to Bay Blvd., Suite 200	
2.4 CITY-ST-ZIP	Tampa, FL 33629	
3.1 TITLE		Change <input type="checkbox"/> Addition <input type="checkbox"/>
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		Change <input type="checkbox"/> Addition <input type="checkbox"/>
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		Change <input type="checkbox"/> Addition <input type="checkbox"/>
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		Change <input type="checkbox"/> Addition <input type="checkbox"/>
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: *W. Andrew Krusen, Jr.* April 30, 1997 (813) 837-3009
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)