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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTME STATE
Sandra B. Ma
Secretary of S
DIVISION OF CORP TIONS

DOCUMENT # **V72037** **(7)**

1. Corporation Name

THE WRIGHT CONCEPT, INC.

Principal Place of Business	Mailing Address
240 PEBBLE BEACH BLVD UNIT #705 NAPLES FL 33962 US	~~240 PEBBLE BEACH BLVD~~ UNIT #705 NAPLES FL 33962 US

3. Date Incorporated or Qualified: **10/09/1992**

3a. Date of Last Report: **05/01/1995**

4. FEI Number: **65-0360836** [X] Applied For [X] Not Applicable

5. Certificate of Status Desired [X] **$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 [X] No

2. Principal Place of Business

21 See below

22 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 See below

27 Suite, Apt. #, etc.

28 City & State

29 Zip 30 Country

9. Name and Address of Current Registered Agent

HALL, THOMAS P.
3443D TAMIAMI TRAIL
PORT CHARLOTTE FL 33952

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.1505, Florida Statutes, the 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

TITLE	DV	[ ] DELETE
NAME	WRIGHT, RICHARD A.	
STREET ADDRESS	3300 LOVELAND BLVD.#701	
CITY-ST-ZIP	CHARLOTTE HARBOR FL	
TITLE	DP	[ ] DELETE
NAME	WRIGHT, PAMELA R.	
STREET ADDRESS	3300 LOVELAND BLVD.#701	
CITY-ST-ZIP	CHARLOTTE HARBOR FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[X] Change [ ] Addition

1959 RATTLESNAKE HAMMOCK #101 NAPLES, FLA 33963

[X] Change [ ] Addition

Same

[ ] Change [ ] Addition

[ ] Change [ ] Addition

[ ] Change [ ] Addition

[ ] Change [ ] Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and certify that the information indicated on this annual report or supplemental annual report is true. I further certify 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 added to the report with an address.

SIGNATURE: Pamela R. WRI 3/28/96 941774384

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR D

CR2E034 (12/95)