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Apr 07 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. McMath, Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V73988

(0)

1. Corporation Name

DELAFIELD & NICHOLS REAL ESTATE, INC.

Principal Place of Business

4625 N. HWY A1A  
VERO BEACH FL 32963

Mailing Address

4625 N. HWY A1A  
VERO BEACH FL 32963-1364



3. Date Incorporated or Qualified

10/23/1992

3a. Date of Last Report

02/05/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

HENDERSON, STEVE L.  
817 BEACHLAND BLVD.  
VERO BEACH FL 32963

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 607.0502 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

OFFICERS AND DIRECTORS

TITLE

D

DELETE

NAME

NICHOLS, ANNA P.  
4625 N. HWY A1A  
VERO BEACH FL

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

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NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

Change

Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

Change

Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

Change

Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

Change

Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

Change

Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

Change

Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

400002122754  
-03/24/97--01200--008  
\*\*\*330.00

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: x

Anna P. Nichols  
Director

x 1/24/97 x

(561)  
234-3801

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0100370

CR2E034 (9/96)