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Mar 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000002292 (8)

1. Corporation Name

B.T.C. PARENTS, INCORPORATED



Principal Place of Business 3756 N.W. 37TH STREET LAUDERDALE LAKES FL 33309		Mailing Address P.O. BOX #8894 FT. LAUD. FL 33310-8894		3. Date Incorporated or Qualified 04/24/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0666507
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
24	Country	29	Country	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
25	Country	30	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BLACK-BARRON, KAREN E
3756 N.W. 37TH STREET
LAUDERDALE LAKES FL 33309

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLACK-BARRON, KAREN E	1.2 NAME	
STREET ADDRESS	3756 NW 37TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERDALE LAKES FL 33309	1.4 CITY-ST-ZIP	
TITLE	DVT <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GIBBS, VONICE	2.2 NAME	
STREET ADDRESS	7497 NW 49TH PLACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERHILL FL 33319	2.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOCKHART, KAYSANDRA	3.2 NAME	
STREET ADDRESS	5820 N.W. 17TH PLACE, UNIT 206	3.3 STREET ADDRESS	
CITY-ST-ZIP	SUNRISE FL 33313	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARTIN, THELMA D	4.2 NAME	
STREET ADDRESS	620 N.W. 33RD AVE.	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33311	4.4 CITY-ST-ZIP	
TITLE	FS <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TURNER-SHORES, KATHY	5.2 NAME	
STREET ADDRESS	2343 N.W. 28TH STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33311	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Karen Black-Barron* Karen E. Black-Barron

(954) 7792-2010
-2/24/98-

CF2E037 (10/97)