

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortimer
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F29494** (4)

1. Corporation Name
~~AMI-PROPERTIES, INC.~~ **IBG PROPERTIES, INC.**

*N/C
12/07/95*



Principal Place of Business: HWY 80 W POB 459 LABELLE FL 33935
Mailing Address: HWY 80 W POB 459 LABELLE FL 33935

2. Principal Place of Business
21 State, Apt. #, etc.
22 City & State
23 Zip
24 Country
25
2a. Mailed Address
26 P.O. Box 459
27 Attn: Kathy McDaniel
28 LaBelle, FL
29 33935
30 US

3. Date Incorporated or Qualified: 04/14/1981
3a. Date of Last Report: 05/01/1995
4. FET Number: 59-2086555
Applied For: Not Applicable
5. Certificate of Status Desired: \$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 No

9. Name and Address of Current Registered Agent
BERRY, JACK M JR
HWY 80 W
LABELLE FL 33935

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 607.0102 and 607.1503, 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 607.0105, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS
1. NAME: ST MCDANIEL, KATHY
2. STREET ADDRESS: 270 LIVE OAK LANE LABELLE FL
3. CITY, ST, ZIP: PD
4. NAME: BERRY, JACK M JR
5. STREET ADDRESS: 1945 8TH TERRACE SE WINTER HAVEN, FL 00000
6. CITY, ST, ZIP: V
7. NAME: CALDWELL, ERNIE
8. STREET ADDRESS: HIGHWAY 80, WEST LABELLE FL 33935
9. CITY, ST, ZIP: [] DELETE
10. NAME: [] DELETE
11. STREET ADDRESS: [] DELETE
12. CITY, ST, ZIP: [] DELETE
13. NAME: [] DELETE
14. STREET ADDRESS: [] DELETE
15. CITY, ST, ZIP: [] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11.1 TITLE: [] Change [] Addition
12. NAME: [] Change [] Addition
13. STREET ADDRESS: [] Change [] Addition
14. CITY, ST, ZIP: [] Change [] Addition
15. NAME: Berry, Jack M Jr
16. STREET ADDRESS: 1945 8th Terrace SE
17. CITY, ST, ZIP: Winter Haven FL 33880
18. TITLE: [] Change [] Addition
19. NAME: PD
20. STREET ADDRESS: Heath, Warren K Hwy. 80 West
21. CITY, ST, ZIP: LaBelle FL 33935
22. TITLE: [] Change [] Addition
23. NAME: [] Change [] Addition
24. STREET ADDRESS: 400001715294
25. CITY, ST, ZIP: 02215296-01015-006
26. TITLE: ***208.75
27. NAME: [] Change [] Addition
28. STREET ADDRESS: [] Change [] Addition
29. CITY, ST, ZIP: [] Change [] Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 in an attachment with an address.

SIGNATURE: *Kathy H. McDaniel* Kathy H. McDaniel, Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 17, 1996 (941)675-2769

CR2E034 (12/95)