

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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**Apr 23 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 # P18721 (1)

1. Corporation Name
SILVER FOX, INC.



Principal Place of Business 1190 THIRD STREET NAPLES FL 33940	Mailing Address 1190 THIRD STREET NAPLES FL 34102-7055
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 04/06/1988	3a. Date of Last Report 04/15/1996
21 State, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 56-1129676	Applied For <input type="checkbox"/> Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip Country	28 Zip Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Zip Country	29 Zip Country	30	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		10. Name and Address of New Registered Agent	
GREENBERG, HENRY B. 1190 THIRD STREET NAPLES FL 33940		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREENBERG, HENRY B.	1.2 NAME	
STREET ADDRESS	1190 THIRD STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	SOUTH NAPLES FL	1.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREENBERG, NANCY H.	2.2 NAME	
STREET ADDRESS	1190 THIRD STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	SOUTH NAPLES FL	2.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	3.1 TITLE	
NAME	HENDRIX, JOHN D.	3.2 NAME	
STREET ADDRESS	1190 THIRD ST. S	3.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	3.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	4.1 TITLE	
NAME	GREENBERG, BRUCE H	4.2 NAME	
STREET ADDRESS	4825 FOREST DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	COLUMBIA SC	4.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	5.1 TITLE	
NAME	GREENBERG, HENRY B JR.	5.2 NAME	
STREET ADDRESS	7804 ABERCORN ST., EXT.	5.3 STREET ADDRESS	6235 RIVER RD.
CITY-ST-ZIP	SAVANNAH GA	5.4 CITY-ST-ZIP	RICHMOND, VA. 23221
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 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 the information appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: **4-17-97 (941) 262**

CR2E034 (9/96)