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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

Principal Place of Business

167513

(1)

Mailing Address

DEVCON INTERNATIONAL CORP.



1350 E NEWPORT SUITE 201 DEERFIELD BEACH		1350 E NEWPORT CENTER DRIVE SUITE 201 DEERFIELD BEACH FL 33442-7779				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/26/1951				
2. Principal Place of Business		2a. Mailing Address				4. FEI Number		Applied For		
21		26				_59-0671992		Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	×	\$8.75 Additional Fee Required		
City & State		City & State				Election Campaign Financin Trust Fund Contribution	9 🗆	\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip 29	30 Co	untry		This corporation owes or hat Personal Property Tax due.	•	ne current year Intangible XYes		
9.	Name and Address of Current	Registered Agent				10. Name and Address of New	v Registe	ered Agent		
	A, BEVERLY			81	Name					
1350 E. SUITE 2	NEWPORT CENTER DRIVE				Street Address (P.O. Box Number is Not Acceptable)					
DEERFIELD BEACH FL 33443										
				84	City			El 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

agent. I a	m familiar with, and accept the obligations of, Sec	tion 607.0505, Flori	da Statutes.	oraborro board or orrodora	ordey addept in	o appointment do	109.000.00
SIGNATURE	Signature, typed or printed name of regislered agent and title if appl	lcable. (NOTE.	Registered Agent signature	required when reinstating)	D	ATE .	
12.	OFFICERS AND DIRECTOR	is .	13.	ADDITIONS/CHANG	ES TO OFFICERS	AND DIRECTOR	RS IN 12
TITLE	PD	DELETE	1.1 TITLE	VT		Change	Additio
NAME	SMITH, DONALD L., JR.		1,2 NAME	Jan A. Norelid			
STREET ADDRESS	1350 E NEWPORT CENTER DR		1.3 STREET ADDRESS	1350 E. Newport	Center D	rive	·
CITY - ST- ZIP	DEERFIELD BEACH FL		1.4 CITY-ST-ZIP	-Deerfield-Beach			
TITLE	VD	☐ DELETE	2.1 TITLE	- DGCLLLCION - DCCCCLL	, 11, 33,	Change	Addition
NAME	HORNSBY, RICHARD L.		2.2 NAME		<u> 3</u> .		
STREET ADDRESS	1350 E NEWPORT CENTER DR		2.3 STREET ADDRESS				
CITY - ST - ZIP	DEERFIELD BEACH FL		2. 4 CITY - ST - ZIP				
TITLE	٧	☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME	OBENAUF, HENRY C.		3.2 NAME				
STREET ADDRESS	1350 E NEWPORT CENTER DR		3.3 STREET ADDRESS				
CITY - ST - ZIP	DEERFIELD BEACH FL		3.4. CITY-ST-ZIP			··	
TITLE	VT	DELETE	4.1 TITLE			L. Change	Addition
NAME	BARRETT, WALTER B.		4. 2 NAME				
STREET ADDRESS	1350 E NEWPORT CENTER DR		4.3 STREET ADDRESS				
CITY - ST - ZIP	DEERFIELD BEACH FL		4.4 CITY - ST - ZIP				
TITLE	S	☐ DELETE	5.1 TITLE			Change	Addition
NAME	Zirolla, beverly e.		5.2 NAME				
STREET ADDRESS	1350 E NEWPORT CENTER DR		5.3 STREET ADDRESS	,			
CITY-ST-ZIP .	DEERFIELD BEACH FL		5.4 CITY-ST-ZIP				
TITLE	V	DELETE	6.1 TITLE			☐ Change	Addition
NAME	SMITH, DONALD L. III		6.2 NAME				
STREET ADDRESS	1350 EAST NEWPORT CENTER DRIVE		6.3 STREET ADDRESS				
CITY-ST-ZIP	DEERFIELD BEACH FL		6.4 CITY-ST-ZIP				

14. I hereby certify that the Information supplied with this filling 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 truestee 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.