

FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

FILED

Jan 27 1998 8:00am  
Secretary of State

|  |   |  |
|--|---|--|
| PROFIT CORPORATION<br>ANNUAL REPORT<br><b>1998</b> |  | FLORIDA DEPARTMENT OF STATE<br><b>Sandra B. Mooreham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|--|---|--|

DOCUMENT # **179254** (8)  
1. Corporation Name  
**BATEMAN, GORDON & SANDS, INC.**

|   |  |
|---|--|
| Principal Place of Business<br><del>12 N.E. 24TH AVENUE</del><br><del>P.O. BOX 1270</del><br>POMPANO BEACH FL 33061 | Mailing Address<br><del>12 N.E. 24TH AVENUE</del><br>P.O. BOX 1270<br>POMPANO BEACH FL 33061 |
|---|--|



DO NOT WRITE IN THIS SPACE

|  |  |   |  |  |  |
|--|--|---|--|--|--|
| 2. Principal Place of Business<br>21 <b>2413 E ATLANTIC BLVD</b> |  | 2a. Mailing Address<br>26 <b>P O Box 1270</b> |  | 3. Date Incorporated or Qualified<br><b>06/18/1954</b>   |  |
| 22 Suite, Apt. #, etc.   |  | 27 Suite, Apt. #, etc.                        |  | 4. FEI Number<br><b>59-0715027</b>   |  |
| 23 City & State<br><b>POMPANO BEACH, FL.</b>                     |  | 28 City & State<br><b>POMPANO BEACH FL</b>    |  | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>  |  |
| 24 Zip<br><b>33062</b>   |  | 29 Zip<br><b>33061</b>                        |  | 30 Country   |  |
| 25 Country   |  | 30 Country                                    |  | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>   |  |
| 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 |  |

|   |  |  |  |   |           |
|---|--|--|--|---|-----------|
| g. Name and Address of Current Registered Agent<br><b>SANDS, J., LARRY</b><br><b>405 NE 2ND ST</b><br><b>POMPANO BEACH FL 33060</b> |  |  |  | 10. Name and Address of New Registered Agent          |           |
|   |  |  |  | 81 Name   |           |
|   |  |  |  | 82 Street Address (P.O. Box Number Is Not Acceptable) |           |
|   |  |  |  | 83  |           |
|   |  |  |  | 84 City   | <b>FL</b> |
|   |  |  |  | 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                      | <b>S</b> <input type="checkbox"/> DELETE            | 1.1 TITLE   | <b>V</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME                       | <b>SANDS, WINONA</b>                                | 1.2 NAME  | <b>WHITNEY, PETER S. JR.</b>  |
| STREET ADDRESS             | <b>405 NE 2ND ST</b>                                | 1.3 STREET ADDRESS                                    | <b>3120 NE 28 AVE.</b>  |
| CITY-ST-ZIP                | <b>POMPANO BEACH FL</b>                             | 1.4 CITY-ST-ZIP                                       | <b>LIGHTHOUSE PT FL 33064</b>   |
| TITLE                      | <b>TD</b> <input type="checkbox"/> DELETE           | 2.1 TITLE   | <b>V</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME                       | <b>SANDS, LARRY</b>                                 | 2.2 NAME  | <b>STAAB, LORNA L.</b>  |
| STREET ADDRESS             | <b>405 NE 2ND ST</b>                                | 2.3 STREET ADDRESS                                    | <b>410 SE 2 AVE.</b>  |
| CITY-ST-ZIP                | <b>POMPANO BEACH, FL 00000</b>                      | 2.4 CITY-ST-ZIP                                       | <b>POMPANO BEACH FL 33060</b>   |
| TITLE                      | <b>V</b> <input checked="" type="checkbox"/> DELETE | 3.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition                     |
| NAME                       | <del><b>STEELE, CINDY</b></del>                     | 3.2 NAME  |   |
| STREET ADDRESS             | <del><b>4937 SW 123 TERR</b></del>                  | 3.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                | <del><b>COOPER CITY FL</b></del>                    | 3.4 CITY-ST-ZIP                                       |   |
| TITLE                      | <b>PD</b> <input type="checkbox"/> DELETE           | 4.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition                     |
| NAME                       | <b>BROWN, W. DURAN</b>                              | 4.2 NAME  |   |
| STREET ADDRESS             | <b>761 PARKSIDE CIR. N.</b>                         | 4.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                | <b>BOCA RATON FL</b>                                | 4.4 CITY-ST-ZIP                                       |   |
| TITLE                      | <b>V</b> <input type="checkbox"/> DELETE            | 5.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition                     |
| NAME                       | <b>BUCHANAN, PETER</b>                              | 5.2 NAME  |   |
| STREET ADDRESS             | <b>2821 N.E. 39TH STREET</b>                        | 5.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                | <b>LIGHTHOUSE POINT FL</b>                          | 5.4 CITY-ST-ZIP                                       |   |
| TITLE                      | <b>V</b> <input type="checkbox"/> DELETE            | 6.1 TITLE   | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition          |
| NAME                       | <b>NEDERLANDEN, ALAN</b>                            | 6.2 NAME  | <b>NEDERLANDEN, ALAN.</b>   |
| STREET ADDRESS             | <b>2741 NE 52 CT.</b>                               | 6.3 STREET ADDRESS                                    | <b>2500 NE 23 ST.</b>   |
| CITY-ST-ZIP                | <b>LIGHTHOUSE PT. FL 33064</b>                      | 6.4 CITY-ST-ZIP                                       | <b>POMPANO BEACH FL 33062</b>   |

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Sandra B. Mooreham* **J. LARRY SANDS** TREASURER JAN 20, 1998 954 941-0925

CR2E034 (10/97)