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FILED

Mar 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000089090 (0)

1. Corporation Name
NATIONAL C. S. & V., INC.

Principal Place of Business

% ROGERS, BOWERS, DEMPSEY AND PALADINO
505 S. FLAGLER DR., STE. 1330
WEST PALM BEACH FL 33401

Mailing Address

% ROGERS, BOWERS, DEMPSEY AND PALADINO
505 S. FLAGLER DR., STE. 1330
WEST PALM BEACH FL 33401-5978



3. Date Incorporated or Qualified
10/28/1996

3a. Date of Last Report

4. FEI Number

65-0713596

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

2. Principal Place of Business

21 2620 Carter Lane
Suite, Apt #, etc.

2a. Mailing Address

26 P.O. Box 1646
Suite, Apt #, etc.

City & State

23 Lake Worth, FL

City & State

28 Lake Worth, FL

Zip

24 33460

Country

25 Palm Beach

Zip

29 33460

Country

30 Palm Beach

9. Name and Address of Current Registered Agent

WENMAN, JUANITA I
% ROGERS, BOWERS, DEMPSEY AND PALADINO
505 S. FLAGLER DR., STE. 1330
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name

Robert B. Nichols Sr

82 Street Address (P.O. Box Number is Not Acceptable)

1407 Rupp Lane

83

84 City

Lake Worth

FL

85 Zip Code

33460

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3/1/97

12. OFFICERS AND DIRECTORS

TITLE DPST
NAME WENMAN, JUANITA I
STREET ADDRESS 505 S. FLAGLER DR., STE. 1330
CITY-ST-ZIP WEST PALM BEACH FL 33401

DELETE

TITLE President
NAME Kevin W. Smith
STREET ADDRESS 129 Vegas Dr
CITY-ST-ZIP Nokomis, FL 33425

DELETE

TITLE Vice President
NAME Mark K. Nichols
STREET ADDRESS 1407 Rupp Lane
CITY-ST-ZIP Lake Worth, FL 33460

DELETE

TITLE Sec
NAME Robert B. Nichols, Sr
STREET ADDRESS 1407 Rupp Lane
CITY-ST-ZIP Lake Worth, FL 33460

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

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 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/1/97

CR2E034 (9/96)