

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

FILED
May 06 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 297596 (9)
1. Corporation Name
R.V. MONEY, INC.



Principal Place of Business
2650 GANDY BLVD
ST PETERSBURG FL 33702

Mailing Address
2650 GANDY BLVD
ST PETERSBURG FL 33702

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/29/1965	
21. Suite, Apt. #, etc.	22. City & State	26. Suite, Apt. #, etc.	27. City & State	4. FEI Number 59-1108694	Applied For Not Applicable
23. Zip	25. Country	28. Zip	30. Country	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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent SPAUDE, W. C. 2650 GANDY BLVD ST PETERSBURG FL 33702				10. Name and Address of New Registered Agent	
				81. Name	
				82. Street Address (P.O. Box Number is Not Acceptable)	
				83.	
				84. City	85. Zip Code FL

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 _____
(Signature typed or printed name of registered agent and block if applicable)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	[] DELETE		1.1 TITLE	[] Change [] Addition		
NAME	SPAUDE, W C			1.2 NAME			
STREET ADDRESS	13023 FARMINGTON TR.			1.3 STREET ADDRESS			
CITY-ST-ZIP	SEMINOLE FL			1.4 CITY-ST-ZIP			
TITLE	SD	[] DELETE		2.1 TITLE	[] Change [] Addition		
NAME	SPAUDE, SANDRA L			2.2 NAME			
STREET ADDRESS	13023 FARMINGTON TR.			2.3 STREET ADDRESS			
CITY-ST-ZIP	SEMINOLE FL			2.4 CITY-ST-ZIP			
TITLE	TD	[] DELETE		3.1 TITLE	[] Change [] Addition		
NAME	SPAUDE, AMY L.			3.2 NAME			
STREET ADDRESS	13023 FARMINGTON TRAIL			3.3 STREET ADDRESS			
CITY-ST-ZIP	SEMINOLE FL			3.4 CITY-ST-ZIP			
TITLE	VD	[] DELETE		4.1 TITLE	[] Change [] Addition		
NAME	SPAUDE, TOD A.			4.2 NAME			
STREET ADDRESS	614 S ROLAND			4.3 STREET ADDRESS			
CITY-ST-ZIP	BUSHNELL FL			4.4 CITY-ST-ZIP			
TITLE		[] DELETE		5.1 TITLE	[] Change [] Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		[] DELETE		6.1 TITLE	[] Change [] Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

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 _____ W. C. Spaude, Pres. 3/31/98 813-576-1778

CR2E034 (10/97)