

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

FILED

Feb 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **369790** (1)
1. Corporation Name
EVELYN F. NEVILLE, INC.

Principal Place of Business
**DRAWER 3327
VERO BEACH FL 32984**

Mailing Address
**DRAWER 3327
VERO BEACH FL 32984**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/16/1970	
21 Suite, Apt. #, etc.	22 City & State	23 Zip	24 Country	25 Suite, Apt. #, etc.	26 City & State
27 Zip	28 Country	29 Suite, Apt. #, etc.	30 City & State	31 Zip	32 Country
9. Name and Address of Current Registered Agent NEVILLE, EVELYN F 2235 FOURTEENTH AVENUE VERO BCH FL 32980				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	
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.					

NEVILLE, EVELYN F
2235 FOURTEENTH AVENUE
VERO BCH FL 32980

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 *Evelyn F. Neville, Evelyn F. Neville, President* 1-24-1998
Signature types or perfect name of registered agent and title is acceptable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
STREET ADDRESS	2235 FOURTEENTH AVENUE	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
CITY - ST - ZIP	VERO BCH FL	2.1 TITLE	2.2 NAME
TITLE	NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
STREET ADDRESS	2237 FOURTEENTH AVENUE	3.1 TITLE	3.2 NAME
CITY - ST - ZIP	VERO BCH, FL 00000	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
TITLE	NAME	4.1 TITLE	4.2 NAME
STREET ADDRESS	3355 OCEAN DRIVE	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
CITY - ST - ZIP	VERO BCH, FL 00000	5.1 TITLE	5.2 NAME
TITLE	NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
STREET ADDRESS		6.1 TITLE	6.2 NAME
CITY - ST - ZIP		6.3 STREET ADDRESS	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: *Evelyn F. Neville, Evelyn F. Neville* 1-24-98 561-569-2877

CR2E034 (10/97)