

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

FILED
Mar 10 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 # 416713 (6)
1. Corporation Name
MANCHESTER INVESTMENTS, INC.

Principal Place of Business 3033 RIVIERA DR STE 201 NAPLES FL 34103 US	Mailing Address 3033 RIVIERA DR STE 201 NAPLES FL 34103 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/15/1973	
21 Suite, Apt #, etc.	26	27 Suite, Apt #, etc.	28	4. FEI Number 59-1489161	Applied For Not Applicable
22 City & State	27	29 City & State	30	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	28	31 Zip	32	6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/>	\$5.00 May Be Added to Fees
24 Country	29	33 Country	34	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 BUDD, DAVID G. 3033 RIVIERA DR STE 201 NAPLES FL 34103		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 _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUDD, DAVID G	1.2 NAME	
STREET ADDRESS	3033 RIVIERA DR., STE. 201	1.3 STREET ADDRESS	
CITY- ST- ZIP	NAPLES FL	1.4 CITY- ST- ZIP	
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUBIN, ALEX	2.2 NAME	
STREET ADDRESS	3033 RIVIERA DR., STE. 201	2.3 STREET ADDRESS	
CITY- ST- ZIP	NAPLES FL	2.4 CITY- ST- ZIP	
TITLE	STD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUBIN, HARRY	3.2 NAME	
STREET ADDRESS	3033 RIVIERA DR., STE. 201	3.3 STREET ADDRESS	
CITY- ST- ZIP	NAPLES FL	3.4 CITY- ST- ZIP	
TITLE	AS=	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZUGOARO, SHARON M-	4.2 NAME	
STREET ADDRESS	3033 RIVIERA DR., STE. 201	4.3 STREET ADDRESS	
CITY- ST- ZIP	NAPLES FL-	4.4 CITY- ST- ZIP	
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUBIN, BENJAMIN	5.2 NAME	
STREET ADDRESS	3033 RIVIERA DR., STE. 201	5.3 STREET ADDRESS	
CITY- ST- ZIP	NAPLES FL	5.4 CITY- ST- ZIP	
TITLE	VAS	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUBIN, LINDA	6.2 NAME	
STREET ADDRESS	3033 RIVIERA DR., STE. 201	6.3 STREET ADDRESS	
CITY- ST- ZIP	NAPLES FL	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: *David G. Budd* David G. Budd 3/2/98 (941) 263-7700

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