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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **441856**

BEARD/SEWALL INC.

REINSTATEMENT

Principal Place of Business: **6060 Pasadena Pt. Blvd. Gulfport, FL 33707**
 Mailing Address: **6060 Pasadena Pt. Blvd. Gulfport, FL 33707**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 Gulfport		26 6060 Pasadena Pt. Blvd.		Sept. 1994		1995	
22 Gulfport, FL		27 Gulfport, FL		4. FEI Number		Applied For	
24 33707		29 33707		59-1556202		Not Applicable	
25 US		30 US		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23 Gulfport, FL		28 Gulfport, FL		6. Election Campaign Financing		\$5.00 May Be Added to Fees	
24 33707		29 33707		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Margaret W. Beard 6060 Pasadena Pt. Blvd. Gulfport, FL 33707		81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 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: *Margaret W. Beard* **Margaret W. Beard, Sec./Chrm.** **Feb. 10, 1997**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE <input type="checkbox"/> DELETE NAME G. Burnham Beard STREET ADDRESS 6060 Pasadena Pt. Blvd. CITY-STATE-ZIP Gulfport, FL 33707 12 TITLE <input type="checkbox"/> DELETE NAME Vice Pres./Treas./Director STREET ADDRESS 529 Sandy Hook Dr. CITY-STATE-ZIP Treasure Island, FL 33706 13 TITLE <input type="checkbox"/> DELETE NAME Secretary/Chrm./Director/Agent STREET ADDRESS Margaret W. Beard CITY-STATE-ZIP 6060 Pasadena Pt. Blvd. 14 TITLE <input type="checkbox"/> DELETE NAME Gulfport, FL 33707		11 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 12 NAME 13 STREET ADDRESS 14 CITY-STATE-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-STATE-ZIP 31 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 32 NAME 33 STREET ADDRESS 34 CITY-STATE-ZIP 41 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 42 NAME 43 STREET ADDRESS 44 CITY-STATE-ZIP 51 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 52 NAME 53 STREET ADDRESS 54 CITY-STATE-ZIP 61 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 62 NAME 63 STREET ADDRESS 64 CITY-STATE-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 included 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 a duly elected officer 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 on Block 12 or Block 13 or Block 14 or on an attachment with an address.

SIGNATURE: *Margaret W. Beard* **Margaret W. Beard, Sec.** **2/10/97** **813 345-7845**

CR2E034 (9/96)