

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

FILED
Mar 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 # 515339 (0)

1. Corporation Name
STACY ENTERPRISES, INC.

Principal Place of Business
16240 US 41 SOUTH
FT MYERS FL 33908

Mailing Address
16240 US 41 SOUTH
FT MYERS FL 33908



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1800 Banks Road Suite, Apt. #, etc. 22 City & State Margate FL Zip Country 33063 USA		2a. Mailing Address 26 1800 Banks Road Suite, Apt. #, etc. 27 City & State Margate FL Zip Country 33063 USA		3. Date Incorporated or Qualified 09/29/1976	
				4. FEI Number 59-1694471	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$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 type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent STACY, ROBERT R. 16240 U.S. 41 SOUTH FT. MYERS FL 33908		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 1800 Banks Road 83 84 City Margate FL 85 Zip Code 33063	
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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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STACY, BRENDA B	1.2 NAME	
STREET ADDRESS	16240 US 41 SOUTH	1.3 STREET ADDRESS	1800 Banks Road
CITY-ST-ZIP	FT MYERS, FL 00000	1.4 CITY-ST-ZIP	Margate, FL 33063-7763
TITLE	PD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STACY, ROBERT R	2.2 NAME	
STREET ADDRESS	16240 US 41 SOUTH	2.3 STREET ADDRESS	1800 Banks Road
CITY-ST-ZIP	FT MYERS, FL 00000	2.4 CITY-ST-ZIP	Margate, FL 33063-7763
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:  BRANDA STACY 3-4-98

CR2E034 (10/97)