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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

529681

(9)

REVELL AND REVELL CORPORATION					
Principal Plac	o of Rusiness	Mailing Address			
HIGHWAY 20					
BRISTOL FL 32321 BRISTOL FL 32321				DO NOT WRITE IN THIS	S SPACE
				3. Date Incorporated or Qualified	,
0 5 10		On Mailing Addison	<del>.</del>	03/18/1977	- 1 14 0 15
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-1921623	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24	25	1 1	30	Personal Property Tax due June 30.	☐ Yes ☐ No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered	1 Agent
REVELL, GORDON P.			oi Name		•
	DBYN DRIVE		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	20 11 100 212 222 23
l Br	IISTOL FL 32321		83		<del></del>
			84 City		85 Zip Code
		····		F	Lili
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.					
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE		A SOLIT OF THE SOL	Registered Agent signature requir	red when reinstating) DATE	
12.	Signature, typed or printed name of registered agen OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	VD	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	REVELL, WAYNE		1.2 NAME		
STREET ADDRESS	2488 ELFINWING LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	PEACOCK, JOHN		2.2 NAME		
STREET ADDRESS	CHIPOLA RD		2.3 STREET ADDRESS		
CITY-ST-ZIP	BLOUNTSTOWN, FL 00000		2. 4 CITY - ST - ZIP		[ ] Ol
TITLE	D D	☐ DELETE	3,1 TITLE		Change . Addition
NAME	DAVIS, REX		3.2 NAME		
STREET ADDRESS	HIGHWAY 12-S BRISTOL FL		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	PD PD	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
l	REVELL, GORDON P.	BEEF/E	4.2 NAME		Chango / Addition
NAME OTDEET ADDRESS	ROBYN DRIVE		4.2 TARGE 4.3 STREET ADDRESS		
STREET ADDRESS	BRISTOL, FL 00000				
CITY-ST-ZIP TITLE	D	DELETE	4.4 CITY~ST~ZIP 5.1 TITLE		Change Addition
NAME	TOMLINSON, JOHN		5.2 NAME		- —
STREET ADDRESS	516 W HENTZ AVE		5.3 STREET ADDRESS		
CITY-ST-ZIP	BLOUNTSTOWN, FL 00000		5.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	6.1 TITLE		Change Addition
NAME	REVELL, WILLIE F.		6.2 NAME		
STREET ADDRESS	MYERS ANN STREET		6.3 STREET ADDRESS		
1	DDIOTOL EL COCCO		<b>1</b>		

14. I hereby certify that the information supplied with this filling 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 of 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 73 if changed, or on an attachment with an adviress.

SIGNATURE:

Gordon P. Revell 1-698 (850)643-2214

**FILED** 

Jan 15 1998 8:00am

Secretary of State

CR2E034 (10/97)