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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #
1. Corporation Name

(7)

	ey brown's of vero i				
Principal Place of Business		Mailing Address			(411 81611 41911 41411 61411 1641
1400 GULFSHORE BLVD N NAPLES FL 33940		1400 GULFSHORE BLVD N NAPLES FL 33940		DO NOT WRITE IN THI	IS SPACE
				3. Date Incorporated or Qualified	IS STACE
				04/01/1979	
2. Principal Place of Business 21		2a. Mailing Address		4. FEI Number	Applied For
		26		59-1888645	Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State	3		Fee Required
23	·	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	
24 34	(O) 25		o	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curr	rent Registered Agent		10. Name and Address of New Registers	d Agent
PHILLIPS, D M			81 Name		
1400 GULFSHORE BLVD, N			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
NA NA	PLES FL 33940		83		
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statutes	, the above-named corpo	oration submits this statement for the purpose	of changing its registered
office or r	egi s tered agent, or both, in the Sta m fam iliar with, and accept the ob	ate of Florida. Such change was au ligations of, Section 607,0505, Flori	thorized by the corporational data.	oration submits this statement for the purpose on's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE		5			
	Signature, typed or profed name of registered		Registered Agent signature required		
12.	OFFICERS /	AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
NAME	PHILLIPS, DENNIS M		1.1 TITLE 1.2 NAME		C) Change C Audition
STREET ADDRESS	3480 RUM ROW		1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		1.4 CITY-ST-ZIP		
TITLE	\$D	DELETE	2.1 TITLE		Change Addition
NAME	PHILLIPS, NANCY		2.2 NAME	,	
STREET ADDRESS	3480 RUM ROW		2.3 STREET ADDRESS		
Crty+St-ZiP	NAPLES FL	T priete	2. 4 C(TY - S1 - Z(P		T Ob T Addition
TITLE		() DELETE	3.1 TITLE		Change Addition
NAME STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-2IP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		The second secon	4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-S1-ZIP TITLE		DELETE	5.4 City-St-7iP 6.1 Title		Change Addition
NAME		vale	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
DITY OF 710			6 1 0/TV CT 7/D		

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 original trachment with an address.

FILED

Apr 13 1998 8:00am

Secretary of State