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FILED  
Feb 18 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 828310 (3)  
1. Corporation Name  
AVATAR UTILITIES INC.

Principal Place of Business  
4837 SWIFT RD.  
SUITE 100  
SARASOTA FL 34231

Mailing Address  
4837 SWIFT RD.  
SUITE 100  
SARASOTA FL 34231



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		07/18/1972	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		23-1582615	
24 Country		29 Country		Applied For	
				Not Applicable	
				5. Certificate of Status Desired <input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALLEN, GERALD S  
4837 SWIFT RD.  
SUITE 100  
SARASOTA FL 34231

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

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	PDC	1.1 TITLE	D
NAME	GORDON, ROBERT B	1.2 NAME	MCNAIRY, CHARLES L.
STREET ADDRESS	255 ALHAMBRA CIRCLE,	1.3 STREET ADDRESS	255 ALHAMBRA CIRCLE
CITY-ST-ZIP	CORAL GABLES FL	1.4 CITY-ST-ZIP	CORAL GABLES FL 33134
TITLE	PDC	2.1 TITLE	
NAME	ALLEN, GERALD S	2.2 NAME	
STREET ADDRESS	4837 SWIFT RD., #100	2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34231	2.4 CITY-ST-ZIP	
TITLE	VTD	3.1 TITLE	
NAME	MURPHY, MICHAEL	3.2 NAME	
STREET ADDRESS	4837 SWIFT RD., #100	3.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34231	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	GETMAN, DENNIS J.	4.2 NAME	
STREET ADDRESS	255 ALHAMBRA CIR	4.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	JACOBSON, EDWIN	5.2 NAME	
STREET ADDRESS	255 ALHAMBRA CIRCLE,	5.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	5.4 CITY-ST-ZIP	
TITLE	S	6.1 TITLE	
NAME	CHUBBUCK, ANITA J	6.2 NAME	
STREET ADDRESS	4837 SWIFT RD #200	6.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA 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:

Gerald S. Allen PDC 1/27/98 (941)925-3088

CR2E034 (10/97)