FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

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95 MAY -1 AM 9:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

DOCUMENT # G25929 (2)

1. Corporation Name

CONSEL, INC. OF FLORIDA

Principal Place of Business: 325 LOGAN BLVD, NAPLES FL 33999

Mailing Address: 325 LOGAN BLVD, NAPLES FL 33999

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/01/1983

3a. Date of Last Report: 05/01/1994

4. FEI Number: 59-2262444 — Applied For / Not Applicable

5. Certificate of Status Desired ✓ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees

2. Principal Place of Business — 21, 22 Suite, Apt # etc., 23 City & State, 24 Zip, 25 Country

2a. Mailing Address — 26, 27 Suite, Apt # etc., 28 City & State, 29 Zip, 30 Country

8. Florida Statutes [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

SELVIA, RONALD R.
325 LOGAN BLVD
NAPLES FL 33999

10. Name and Address of New Registered Agent

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

12. OFFICERS AND DIRECTORS

TITLE	PVS
NAME	SELVIA, RONALD
STREET ADDRESS	325 LOGAN BLVD
CITY-ST-ZIP	NAPLES, FL 00000
TITLE	T
NAME	SELVIA, RAY
STREET ADDRESS	325 LOGAN BLVD.
CITY-ST-ZIP	NAPLES FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

[ ] Change [ ] Addition

14. I do hereby certify that the information supplied with this filing is voluntary, furnished and does not qualify for the exemption stated in Section 119.07, 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: Ronald R. Selvia — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 2 — Date

813 643-7345 — Daytime Phone

0332673 CP