

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

FILED  
Apr 22 1998 8:00am  
Secretary of State

DOCUMENT # **G35799** (7)  
1. Corporation Name  
**LEVEROCK'S SEAFOOD HOUSE OF MADEIRA BEACH, INC.**



Principal Place of Business Mailing Address  
**54 COREY AVE.** **54 COREY AVE.**  
**PO BOX 66159** **PO BOX 66159**  
**ST.PETERSBURG BCH. FL 33736-3159** **ST.PETERSBURG BCH. FL 33736-3159**

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.		04/26/1983	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-2297555	
24 Country		30 Country		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	
				8. This corporation owes or has paid the current year Intangible	
				Personal Property Tax due June 30.	
				Yes No	

9. Name and Address of Current Registered Agent

**ENGLANDER, LEONARD S.**  
**6666-22ND AVENUE NORTH**  
**5959 CENTRAL AVENUE**  
**ST. PETERSBURG FL 33710**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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	CEO	1.1 TITLE	
NAME	STROSS, JOHN E	1.2 NAME	
STREET ADDRESS	54 COREY AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	1.4 CITY-ST-ZIP	
TITLE	SDT	2.1 TITLE	
NAME	TAPPAN, RICHARD A	2.2 NAME	
STREET ADDRESS	11185 9TH ST E	2.3 STREET ADDRESS	
CITY-ST-ZIP	TREASURE ISL, FL 00000	2.4 CITY-ST-ZIP	
TITLE	P	3.1 TITLE	
NAME	LEWIS, GEORGE E IV	3.2 NAME	
STREET ADDRESS	54 COREY AVENUE	3.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG BCH FL	3.4 CITY-ST-ZIP	
TITLE	SRVP	4.1 TITLE	
NAME	CHANDLER, RICHARD	4.2 NAME	
STREET ADDRESS	54 COREY AVENUE	4.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG BEACH FL	4.4 CITY-ST-ZIP	
TITLE	SRVP	5.1 TITLE	
NAME	PHILLIPS, JOHN	5.2 NAME	
STREET ADDRESS	54 COREY AVENUE	5.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG BEACH, FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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.

CR2E034 (10/97)