

FILED
Feb 17 1998 8:00am
Secretary of State

DOCUMENT # H13321 (5)
1. Corporation Name
EVERS INCORPORATED

Principal Place of Business	Mailing Address
2148 B MCGREGOR BLVD FT. MYERS FL 33901 US	2148 B MCGREGOR BLVD FT. MYERS FL 33901 US

2. Principal Place of Business		2a. Mailing Address	
21		26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
Zip	Country	Zip	Country
24	25	29	30

g. Name and Address of Current Registered Agent	
EVERS, ROBERT FREDERICK 2148 B MCGREGOR BLVD FT MYERS FL 33901	81 Name
	82 Street Address
	83
	84 City

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporate office or registered agent, or both, in the State of Florida. Such change was authorized by the corporate 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 requires

12. OFFICERS AND DIRECTORS				13.	
TITLE	VD	<input type="checkbox"/> DELETE	1.1 TITLE		
NAME	EVERS, FREDERICK J. JR.		1.2 NAME		
STREET ADDRESS	154 CONNECTICUT AVENUE		1.3 STREET ADDRESS		
CITY - ST - ZIP	FT. MYERS FL		1.4 CITY - ST - ZIP		
TITLE	STD	<input checked="" type="checkbox"/> DELETE	2.1 TITLE		
NAME	EVERS, DORIS ELIZABETH		2.2 NAME		
STREET ADDRESS	154 CONNECTICUT AVENUE		2.3 STREET ADDRESS		
CITY - ST - ZIP	FT. MYERS FL		2.4 CITY - ST - ZIP		
TITLE	PD	<input type="checkbox"/> DELETE	3.1 TITLE		
NAME	EVERS, ROBERT F.		3.2 NAME		
STREET ADDRESS	154 CONNECTICUT AVENUE		3.3 STREET ADDRESS		
CITY - ST - ZIP	FT. MYERS FL		3.4 CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE		
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE		
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE		
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY - ST - ZIP		

3. Date Incorporated or Qualified 07/23/1984		
4. FEI Number 59-2432523		Applied For Not Applicable
5. Certificate of Status Desired <input 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 type="checkbox"/> Yes <input type="checkbox"/> No		
10. Name and Address of New Registered Agent		
ss (P.O. Box Number is Not Acceptable)		
FL		85 Zip Code

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 partner or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 on Exhibit D1 (Individual or Officer's Statement with an Employee).

SIGNATURE: Frederick J. Brown 2-10-98 94-332-5470