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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

9625 ALONZO RD

CITY - ST - ZIP

SIGNATURE:

RIVERVIEW FL 33569



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

STRATUS DEVELOPMENT, INC.

Mailing Address

9625 ALONZO RD

RIVERVIEW FL 33569

FILED Jan 15 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

					10/24/1984			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For	
21 26					59-2475455		Not Applicat	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		75 Additional se Required	
City & State	e	City & State			6. Election Campaign Financing	\$5	.00 May Be	
23		28	_ '		Trust Fund Contribution		ded to Fees	
Zip	Country	Zip	Countr	у	8. This corporation owes or has paid the ci	urrent ye	ar Intangible	
24	25	29	30		Personal Property Tax due June 30.	Yes	☐ No	
	9. Name and Address of Curren	it Registered Agent			10. Name and Address of New Registered	J Agent		
SW	/OPE, DALE M.		81	Name				
777 S. HARBOUR ISLAND BLVD				82 Street Address (P.O. Box Number is Not Acceptable)				
SUITE 850				Our Set Address (1.0. Dox Halliber is Not Addeptable)				
	MPA FL 33602		83					
			84	City		-)05	Zin Codo	
			64	City	F!	L 85	Zip Code	
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga-	of Florida. Such change was au	uthorized b	v the corpo	orporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	pointmer	nt as registered	
0,0,1,1,0,1,2	Signature, typed or printed name of registered age		Registered Ag	ent signature rec	quired when reinstaling) DATE.			
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	D	DELETE	t.1 TITLE			Cha	inge 🛄 Additio	
NAME	KEARNEY, BRYAN		1.2 NAME					
STREET ADDRESS	9625 ALONZO RD		1.3 STREE	T ADDRESS				
CITY - ST - ZIP	RIVERVIEW FL		1.4 CITY~:	ST-ZIP				
TITLE	D	L_I DELETE	2.1 TITLE			Cha	nge 🔲 Additlo	
NAME	KEARNEY, C.W., JR.		2.2 NAME					
STREET ADDRESS	9625 ALONZO RD		2.3 STREE	r address				
CITY-ST-ZIP	RIVERVIEW FL.		2. 4 CITY -	ST-ZIP				
TITLE	Р	DELETE	3.1 TITLE			Cha	nge 🔲 Additio	
NAME	KEARNEY, C.W., SR.		3.2 NAME					
STREET ADDRESS	9625 ALONZO RD		3.3 STREE	F ADDRESS				
CITY-ST-ZIP	RIVERVIEW_FL		3.4, CITY -	ST-ZIP				
TITLE	S	☐ DELETE	4.1 TITLE			Cha	nge 🔲 Additio	
NAME [KEARNEY, JOANNE		4. 2 NAME					
STREET ADDRESS	9625 ALONZO RD.		4.3 STREE	T ADDRESS				
CITY - ST - ZIP	RIVERVIEW_FL		4.4 CITY-5	ST-ZIP				
TITLE		DELETE	5.1 YITLE			Cha	nge Additio	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET	r Address				
CITY - ST - ZIP			5.4 CITY-5	ST-ZIP		_		
TITLE		DELETE	6.1 TITLE			Cha	nge 🔲 Additio	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				

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 trusted 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.