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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

H68003

(3)

3D DEVE	LOPMENT & LEASING	CORPORATION	
Principal Place o	f Business	Mailing Address	s
4976 S. 25TH ST. FORT PIERCE FL 34981-5009		4976 S. 25TH ST. FORT PIERCE FL 34981-5009	
2. Principal Place of Business		2a. Mailing Add	ress
21		26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
23		28	
Z:p	Country	Zip	Country
24	25	29	30

FILED Jan 28 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/24/1985 4. FEI Number Applied For 59-2583569 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Yes Yes ΠNo Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ERNSBERGER, R. DALE 104 N.E. CARLISLE LN. 82 Street Address (P.O. Box Number Is Not Acceptable) PORT ST.LUCIE FL 33452 83 Zip Code City 85 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Addition Change DELETE 1.1 TITLE TITLE GREEN, DENNIS SR. 1.2 NAME NAME 3302 ENTERPRISE RD. 1.3 STREET ADDRESS STREET ADDRESS FT PIERCE FL 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE ERNSBERGER, R.DALE NAME 2.2 NAME 104 N.E. CARLISLE LN. STREET ADDRESS 2.3 STREET ADDRESS PORT ST.LUCIE FL 2. 4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 3.1 TITLE TITLE MULLINS, DONALD E. 3.2 NAME NAME 3302 ENTERPRISE RD. 3.3 STREET ADDRESS STREET ADDRESS FT PIERCE FL CITY-ST-ZIP 3,4. CITY - ST - ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition Change DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST-ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST-ZIP 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: