FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 2:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J33029** **(6)**

1. Corporation Name
AVEL DEVELOPMENT CORPORATION

Principal Place of Business
2375 TAMIAMI TRAIL N. #300
NAPLES FL 33940

Mailing Address
2375 TAMIAMI TRAIL N. #300
NAPLES FL 33940

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/12/1986
3a. Date of Last Report: 05/01/1994

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

4. FEI Number: 59-2717871 — 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. Does corporation owe liability for intangible tax under S. 199.032, Florida Statutes? [ ] Yes [ ] No

9. Name and Address of Current Registered Agent
BARON, ELI
2375 TAMIAMI TRAIL N.
SUITE 300
NAPLES FL 33940

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 Section 607.0501 and 607.1008, 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 I agree to comply with the provisions of Section 607.0501, Florida Statutes.

SIGNATURE: Registered Agent (Required if registered agent is changed) — Date — Registered Agent (Required if registered agent is changed) — Date

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	MEADVIN, KENNETH R.
STREET ADDRESS	2375 TAMIAMI TR N 300
CITY, ST, ZIP	NAPLES FL
TITLE	VDC
NAME	BARON, ELI
STREET ADDRESS	2375 TAMIAMI TR N 300
CITY, ST, ZIP	NAPLES FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN '95

TITLE	[ ] Change [ ] Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	[ ] Change [ ] Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	[ ] Change [ ] Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	[ ] Change [ ] Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	[ ] Change [ ] Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	[ ] Change [ ] Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

14. I hereby certify that the information supplied with this report, voluntarily furnished and true, and qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the enclosed annual report or supplemental annual report is true and correct and that all signatures 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 above, or on attached rider, in the capacity shown above, under my signature, or my name appears above, or on attached rider, in the capacity shown above, under my signature, and I hereby accept the appointment as registered agent.

SIGNATURE: [signature] 4-28-95 813 262 6977
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0326378 CP