

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995. AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

APPROVED AND FILED

95 JUL -3 AM 9:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # J58948 (7)

1. Corporation Name
FASHIONS 'N' MORE OF LEHIGH, INC.

Principal Place of Business: **9920 CALOOSA YACHT & RACQUET CLUB DR FT. MYERS FL 33919 US**
Mailing Address: **9920 CALOOSA YACHT & RACQUET CLUB DR FT. MYERS FL 33919 US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Quoted: **02/25/1987** 3a. Date of Last Report: **02/28/1994**
4. FEI Number: **59-2775514** 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**
7. This corporation has liability for interstate tax under s. 199.019, Florida Statutes: Yes No

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

9. Name and Address of Current Registered Agent
**CARNEY, LEE F JR
10823 TAMMAM TR N
STE G
NAPLES FL 33963**

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 Sections 607.0602 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. Thereby accept the appointment as registered agent. I am familiar with and accept the captioned of Section 607.0605, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BEAVERSON, DENNIS
STREET ADDRESS	9920 CALOOSA YACHT & RACQUET CLUB DR
CITY, ST, ZIP	FT. MYERS FL
TITLE	VST
NAME	BEAVERSON, NANCY
STREET ADDRESS	9920 CALOOSA YACHT & RACQUET CLUB DR
CITY, ST, ZIP	FT. MYERS FL
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 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	9920 CALOOSA YACHT & RACQUET CLUB DR
24 CITY, ST, ZIP	FT. MYERS, FL 33919
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I do hereby certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(1)(a) Florida Statutes. I further certify that the information furnished on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as a made under oath. That I am an officer or director of the corporation or an individual or limited partnership to which this report is required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or 13 or 14 of this report as a change of an officer or director with an address.

SIGNATURE: **NANCY R. BEAVERSON SECRETARY**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/27/95 (815) 481-0249

CR2E034 (3/95)