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

Apr 29 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (1)L35567 DEVON INVESTMENT, INC. Principal Place of Business Mailing Address 2329 10TH AVE N. 2328 10TH AVE N SUITE 401 SUITE 401 DO NOT WRITE IN THIS SPACE LAKE WORTH FL 33461 LAKE WORTH FL 33461 3. Date Incorporated or Qualified US <u>12/12/1989</u> 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 59-2981469 Suite, Apt. #, etc \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 28 Trust Fund Contribution Zip Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 30 24 25 29 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name STEIN, CHARLES 2328 10TH AVE N. Street Address (P.O. Box Number is Not Acceptable) SUITE 401 83 LAKE WORTH FL 33461 84 City Zip Code 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 Apent signature required v Signature typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition 11 TITLE TITLE STEIN, CHARLES 1.2 NAME 802 NW 2ND AVE. 1.3 STREET ADDRESS STREET ADDRESS **DELRAY BEACH FL 33444** 1.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE **UDWIN, DENNIS** 2 2 NAME NAME 1161 SW 21ST AVE 2.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change \_\_\_ Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Addition DELETE ☐ Change 6.1 TITLE TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS

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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 true or annowered 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:

**FILED**