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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 06 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

M64756

DOCUMENT # CURRY AND SONS DEVELOPMENT CORP., INC. Principal Place of Business Mailing Address 3450 EAGLE AVE. 3450 EAGLE AVE. KEY WEST FL 33040 KEY WEST FL 33040 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/29/1987 2. Principal Place of Business 2a, Mailing Address Applied For 21 26 65-0026397 Not Applicable Suite, Apt. #, etc. Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 25 29 30 Personal Property Tax due June 30. 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CURRY, SCOTT A. 909 FLEMING ST. Street Address (P.O. Box Number is Not Acceptable)
3 201 Hagler Que 82 KEY WEST FL 33040 83 ucte 504-505 City Zip Code 33040 84 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 Signature, typed or printed hanse of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 DELETE Change Addition 11 TITLE TITLE **CURRY, CHARLES P., JR.** NAME 1.2 NAME 3450 EAGLE AVE. STREET ADDRESS 1.3 STREET ADDRESS KEY WEST FL CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change Addition TITLE 2.1 TITLE CURRY, ELIZABETH A. NAME 2.2 NAME 3450 EAGLE AVE. STREET ADDRESS 2.3 STREET ADDRESS KEY WEST FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE CURRY, SCOTT A. NAME 3.2 NAME 3450 EAGLE AVE. STREET ADDRESS **33 STREET ADDRESS KEY WEST FL** CITY-ST-ZIP 3.4. CITY - ST - ZIP TITI F DELETE 4.1 TITLE Change Addition NAME CURRY, C. MICHAEL 4. 2 NAME 7625 n. W. 51 Dm **841 SW 58TH TERR** STREET ADORESS 4.3 STREET ADDRESS Gainesville, 71. 32653 **GAINESVILLE FL** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5.1 THE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP

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. 3 O S Clinalatt A Ougan. 396-2464

14. Thereby 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