

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -7 PM 4: 15

DOCUMENT # M80321 (6)
1. Corporation Name
DEVCON CROWN BAY CORP.

Principal Place of Business Mailing Address
1350 E. NEWPORT CENTER DRIVE SUITE 201 DEERFIELD BEACH FL 33442-7712
1350 E. NEWPORT CENTER DRIVE SUITE 201 DEERFIELD BEACH FL 33442-7712

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 05/11/1988 3a. Date of Last Report 01/26/1994
4. FEI Number 65-0059666 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. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent
ZIROLLA, BEVERLY
1350 E. NEWPORT CENTER DRIVE
SUITE 201
DEERFIELD BEACH FL 33443

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 607.0502 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 reappointing) DATE _____

12. OFFICERS AND DIRECTORS
TITLE CD
NAME SMITH, DONALD L., JR.
STREET ADDRESS 1350 E NEWPORT CENTER DR
CITY - ST - ZIP DEERFIELD BEACH FL
TITLE PD
NAME HORNSBY, RICHARD L.
STREET ADDRESS 1350 E NEWPORT CENTER DR
CITY - ST - ZIP DEERFIELD BEACH FL
TITLE VT
NAME BARRETT, WALTER B.
STREET ADDRESS 1350 E NEWPORT CENTER DR
CITY - ST - ZIP DEERFIELD BEACH FL
TITLE S
NAME ZIROLLA, BEVERLY E.
STREET ADDRESS 1350 E NEWPORT CENTER DR
CITY - ST - ZIP DEERFIELD BEACH FL
TITLE VD
NAME MOOREHEAD, RONALD
STREET ADDRESS 1350 E NEWPORT CENTER DR
CITY - ST - ZIP DEERFIELD BEACH FL
TITLE AS
NAME ~~BOUTE, ALICIA~~
STREET ADDRESS ~~1350 E NEWPORT CENTER DR~~
CITY - ST - ZIP ~~DEERFIELD BEACH FL~~

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE D Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
3.1 TITLE V/D/T Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE V Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS ← Delete listed information on Block 12
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 *Beverly E. Zirolla* DATE *2/2/95* ORIGINAL FILING # *(305) 429-1500*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR