

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY - 1 PH 2: 53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M95108 (0)

1. Corporation Name

AMERIWEST DEVELOPMENT CORPORATION

Principal Place of Business

738 MARBLE WAY
BOCA RATON FL 33432

Mailing Address

738 MARBLE WAY Post Office Box
BOCA RATON FL 33432 4260
33439

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/19/1988

3a. Date of Last Report

04/20/1994

4. FEI Number

NOT APPLICABLE

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

21. SAME

2a. Mailing Address

26. P.O. Box 4260

Suite, Apt. #, etc.

27. Suite, Apt. #, etc.

City & State

23.

City & State

28. Boca Raton, FL

Zip

Country

24.

Zip

Country

29. 33439

30. Palm Beach

9. Name and Address of Current Registered Agent

STEVENS, R REDDING
738 MARBLE WAY
BOCA RATON FL 33432

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

Signature, typed or printed name of registered agent (and title if applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PST
NAME	STEVENS, R REDDING
STREET ADDRESS	738 MARBLE WAY
CITY - ST - ZIP	BOCA RATON FL
TITLE	D
NAME	STEVENS, R REDDING
STREET ADDRESS	738 MARBLE WAY
CITY - ST - ZIP	BOCA RATON FL
TITLE	CVD
NAME	STEVENS, MARION B.
STREET ADDRESS	738 MARBLE WAY
CITY - ST - ZIP	BOCA RATON FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☐ 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	☐ 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	☐ 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	
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 119.07(3)(k), 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:

Marion B. Stevenson

MARION B. STEVENSON

April 28, 1995

(407)
395-2853