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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

N33250

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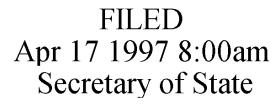
EVEN TIDE, INC.

Principal Place of Business % P. ALLEN SCHOFIELD

Mailing Address

1429 60TH AVE. W., #300

% P. ALLEN SCHOFIELD 1429 60TH AVE. W., #300





BRADENTON FL 34	4207	BRADENTON FL 34207-4697			3. Date Incorporated or Qualified 06/19/1989	3a. Date of Last Report 03/14/1996	
2. Principal Place	of Business	2a. Mailing Address			4. FEI Number	Applied For	
1		26			0070102408	65-0132439 Not Applicable	
Suite, Apt #, e	etc.	Suite, Apt. #, etc). · · · · · · · · · · · · · · · · · · ·		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country 25	Zip 29	Country 30		8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes No	
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
				81 Name			
SCHOFIELD, ALLEN P 1429 60TH AVE WEST			Street Address (P.O. Box Number is Not Acceptable)				
STE 300				83			
BRADENTO	ON FL 34207			84 City		FL 85 Zip Code	
office or reals	stered agent, or both, in the S	.0502 and 617.1508, Florida S tate of Florida. Such change	was authorized	by the cor	corporation submits this statement for the p poration's board of directors. I hereby accep	urpose of changing its registered of the appointment as registered	

SIGNATURE Signature Typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when rainstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. TITLE DELETE 1.1 TITLE PST Change Addition Debraldrown E. BROWN, DEBRA NAME 1.2 NAME 1219 2ND AVE E. STREET ADDRESS 1.3 STREET ADDRESS enton. 7L34208 **BRADENTON FL** 1.4 CITY-ST-ZIP City-St-ZIP DELETE Change 2.1 TITLE ___ Addition Patricia M. Weisberg GRUBBS. DIXIE NAME 2.2 NAME 1219 and Loef. 5416 36TH ST E. STREET ADDRESS 2.3 STREET ADDRESS Bradenton. 72 34208 BRADENTON FL CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE WEISBERG, PATRICIA M. Robert Brown NAME 3.2 NAME 1219 2ND ST E. 3.3 STREET ADDRESS STREET ADDRESS and Live. E., Bradenton Z BRADENTON FL 3.4. CITY-ST-ZIP CITY-ST-7/P DELETE 4.1 TITLE Change Addition TITLE WEISBERG, PATRICIA M. 4. 2 NAME NAME 1219 2ND ST E. STREET ADDRESS 4.3 STREET ADDRESS **BRADENTON FL** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - 7/P 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-S1-7IP 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filling 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

04 67 197 941-749-8352