


FILE NOW: FILING FEE IS \$61.25

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Aug 06, 1999 8:00 am
Secretary of State

08-06-1999 90009 010 ****70.00

NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N33250					
1. Corporation Name EVEN TIDE, INC.					
Principal Place of Business % P. ALLEN SCHOFIELD 1429 60TH AVE. W. #300 BRADENTON FL 34207			Mailing Address % P. ALLEN SCHOFIELD 1429 60TH AVE. W. #300 BRADENTON FL 34207		

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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		06/19/1989	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		65-0132439	
24 Country		30 Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SCHOFIELD, ALLEN P 1429 60TH AVE WEST STE 300 BRADENTON FL 34207				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	VSTD	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BROWN, DEBRA			1.2 NAME			
STREET ADDRESS	1219 2ND AVE. E.			1.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL 34208			1.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WEISBERG, PATRICIA M			2.2 NAME			
STREET ADDRESS	1219 2ND AVE. E.			2.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL			2.4 CITY-ST-ZIP			
TITLE	P	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BROWN, ROBERT			3.2 NAME			
STREET ADDRESS	1219 2ND AVE. E.			3.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL 34208			3.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WEISBERG, PATRICIA M.			4.2 NAME			
STREET ADDRESS	1219 2ND ST E.			4.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL			4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

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 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, with all other like empowered.

SIGNATURE: Debra E. Brown DEBRA E BROWN VP. 3/2/99 941-747-8253

N33250

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1219-2nd AVE. E.
BRADENTON, FL. 34208
Telephone 941-747-8252
FAX 941-748-2552

Even Tide, Inc.

July 28, 1999

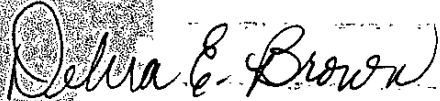
Department of State
Division of Corporations
409 East Gaines St.
Tallahassee, FL 32399

Dear Sir or Madam:

I recently was informed that you had not received our corporation's annual report, which we had filed back in March of the year. I have check with our bank and find that our check, which we had sent with the report also, has not cleared the bank so we have assumed that it is lost somewhere.

Therefore, we are sending a copy of our original report and another check for the filing fees at this time. We would like to thank you for letting us know of this problem. If there are, any questions that you have for please feel free to contact us at any time.

Sincerely,



Debra E. Brown
Vice President

[Click here and type slogan]