


FILE NOW: FILING FEE IS \$61.25

ADVISORY
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N94000000228					
1. Corporation Name PALEONTOLOGICAL EDUCATION PRESERVE, INC.					
Principal Place of Business 233 3RD ST N SUITE 204 ST PETERSBURG FL 33701 US			Mailing Address 233 3RD ST. N. #204 ST PETERSBURG FL 33701 US		

2. Principal Place of Business 21 2 Suite, Apt. #, etc. 22 City & State 23 Zip 24		2a. Mailing Address 26 2627 Manatee Harbor Dr. Suite, Apt. #, etc. 27 Ruskin, FL City & State 28 33570 Zip 29 FL Country 30 Hillsborough		3. Date Incorporated or Qualified 01/07/1994	
		4. FEI Number 59-3227773		Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent KENDLER, ERNEST A 233 3RD ST N ST PETERSBURG FL 33701				10. Name and Address of New Registered Agent B1 Name Ronald J. Shrader B2 Street Address (P.O. Box Number is Not Acceptable) 2627 Manatee Harbor Dr. B3 Ruskin B4 City Ruskin FL 85 Zip Code			
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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 **Ronald J. Shrader** (NOTE: Registered Agent signature required when reinstating) DATE **2/10/99**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DP	NAME	KENDLER, ERNEST A	1.1 TITLE	Ronald J. Shrader D.D.	Change	Addition
STREET ADDRESS	117 WHITE AVE			1.2 NAME	2627 Manatee Harbor Dr.		
CITY-ST-ZIP	HOLMES BEACH FL			1.3 STREET ADDRESS	Ruskin, FL. 33570		
TITLE	D	NAME	KOCSIS, FRANK J	2.1 TITLE	Frank A. Garcia D.	Change	Addition
STREET ADDRESS	2913 FAIRFIELD COURT			2.2 NAME	2626 Manatee Harbor Dr.		
CITY-ST-ZIP	PALM HARBOR FL 34683			2.3 STREET ADDRESS	Ruskin, FL. 33570		
TITLE	T	NAME	WELDON, JACK B.	3.1 TITLE	Donald O. Ward D.	Change	Addition
STREET ADDRESS	2232 BREVARD RD NE			3.2 NAME	2631 Manatee Harbor Dr.		
CITY-ST-ZIP	ST PETERSBURG FL 33704			3.3 STREET ADDRESS	Ruskin, FL. 33570		
TITLE		NAME		4.1 TITLE		Change	Addition
STREET ADDRESS				4.2 NAME	500002787465-5		
CITY-ST-ZIP				4.3 STREET ADDRESS	-02/25/99--01073--005		
TITLE		NAME		4.4 CITY-ST-ZIP	*****61.25	Change	Addition
STREET ADDRESS				5.1 TITLE			
CITY-ST-ZIP				5.2 NAME			
TITLE		NAME		5.3 STREET ADDRESS			
STREET ADDRESS				5.4 CITY-ST-ZIP			
CITY-ST-ZIP				6.1 TITLE		Change	Addition
TITLE		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: **Ronald J. Shrader** (Ronald J. Shrader) 2/10/99 817-641-8853