

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25)

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Oct 08 1998 8:00am
Secretary of State

0006608

DOCUMENT # N97000002745 (4)

1. Corporation Name:

ALLEN TEMPLE NEIGHBORHOOD DEVELOPMENT CORPORATIO
N, INC.

Principal Place of Business:

Mailing Address:

832 AVENUE I
RIVIERA BEACH FL 33419

832 AVENUE I
RIVIERA BEACH FL 33419

2. Principal Place of Business:

21 Suite, Apt. #, etc.

22 City & State:

23 Zip Country

24

2a. Mailing Address:

26 P.O. Box 9021
Suite, Apt. #, etc.

27 City & State:

28 Riviera Beach, FL
Zip Country

29 33419 30 USA

9. Name and Address of Current Registered Agent

CLEARE, JAMES S
832 AVENUE I
RIVIERA BEACH FL 33419

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 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 obligation of, section 617.0503, Florida Statutes.

SIGNATURE

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

James S. Cleare

(NOTE: Registered Agent signature required when reinstating)

8-31-98

DATE

12. OFFICERS AND DIRECTORS

TITLE PD [] DELETE

NAME CLEARE, JAMES S

STREET ADDRESS 142 WEST 25TH AVENUE

CITY-STATE-ZIP RIVIERA BEACH FL 33404

TITLE SD [] DELETE

NAME FINLEY, BERKLEY

STREET ADDRESS 816 WEST TIFFNAY DRIVE

CITY-STATE-ZIP MAJONIA PARK FL 33407

TITLE TD [] DELETE

NAME COUZIN, HARY

STREET ADDRESS 1301 NORTH 10TH STREET

CITY-STATE-ZIP RIVIERA BEACH FL 33404

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[] Change [] Addition

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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.

SIGNATURE:

James S. Cleare
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-31-98

Date

561-308-9288

Daytime Phone #

CR2E037 (5/98)