


FILE NOW: FILING FEE IS \$61.25

FILED

May 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N98000000033 (6)**

1. Corporation Name

PRESERVE OUR NEIGHBORHOOD, INC.



Principal Place of Business	Mailing Address
2401 MANATEE AVENUE WEST BRADENTON FL	2401 MANATEE AVENUE WEST BRADENTON FL

3. Date Incorporated or Qualified	12/30/1997
4. FEI Number	65-0807686
Applied For	<input type="checkbox"/> Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 5096 Kilty Ct. East	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 Bradenton	28
Zip	Country
24 34203	25 USA
29	30

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
7. Is this nonprofit corporation a homeowners association?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent	
CLEARY, KENNETH W 2401 MANATEE AVENUE WEST BRADENTON FL	

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 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 _____ (NOTE: Registered Agent signature required when restate) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	Dir. & Sec. Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOVELACE, DICK	1.2 NAME	
STREET ADDRESS	4822 RAINTREE ST. CIR. EAST	1.3 STREET ADDRESS	5096 Kilty Ct. East
CITY-ST-ZIP	BRADENTON FL 34203	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	Dir. & President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FISCHER, GEORGE	2.2 NAME	
STREET ADDRESS	4827 GADSDEN DR.	2.3 STREET ADDRESS	4822 Raintree St. Cir. E
CITY-ST-ZIP	BRADENTON FL 34203	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PERRONE, ILA	3.2 NAME	
STREET ADDRESS	4517 DOVER STREET CIR. EAST	3.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL 34203	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	Dir. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	Carol B. Montague
STREET ADDRESS		4.3 STREET ADDRESS	4523 51st St. E
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Bradenton, FL 34203
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	Dir. & Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	Ivy Peterson
STREET ADDRESS		5.3 STREET ADDRESS	4924 Kilty Court E
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Bradenton, FL 34203
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	400002518134 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	-05/11/98--01022--035
STREET ADDRESS		6.3 STREET ADDRESS	***\$61.25
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.

SIGNATURE _____

CR2E037 (10/97)