

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 27 AM 10:27

DOCUMENT # **P23181** (1)

1. Corporation Name
AMERICA'S ALL SEASONS INCOME FUND, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address
250 PARK AVE SOUTH **250 PARK AVE SOUTH**
STE - 200 **STE - 200**
WINTER PARK FL 32789-5079 **WINTER PARK FL 32789-5079**
US **US**

3. Date Incorporated or Qualified **02/28/1989** 3a. Date of Last Report **05/01/1994**

2. Principal Place of Business 2a. Mailing Address
21 26

4. FEI Number **59-2915573** Applied For
Not Applicable

22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.

5. Certificate of Status Desired **\$8.75** Additional Fee Required

23 City & State 28 City & State

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

24 Zip 25 Country 29 Zip 30 Country

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
VEITA, DIEGO J.
250 PARK AVE SOUTH
STE - 200
WINTER PARK FL 32789

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature typed or printed name of registered agent and the corporation (NOTE: Registered Agent signature required when necessary)

12. OFFICERS AND DIRECTORS	
TITLE	DC
NAME	VEITA, DIEGO J.
STREET ADDRESS	250 PARK AVE SOUTH / STE - 200
CITY, ST, ZIP	WINTER PARK FL
TITLE	AS
NAME	MOORE, LAURIE K.
STREET ADDRESS	250 PARK AVE SOUTH / STE - 200
CITY, ST, ZIP	WINTER PARK FL
TITLE	AS
NAME	MCMURTRY, NANCEY M.
STREET ADDRESS	250 PARK AVE SOUTH / STE - 200
CITY, ST, ZIP	WINTER PARK FL
TITLE	D
NAME	DAY, ADRIAN
STREET ADDRESS	900 BESTGATE ROAD #405
CITY, ST, ZIP	ANNAPOLIS MD
TITLE	D
NAME	MILLER, ROBERT A.
STREET ADDRESS	2817 RHETT DRIVE
CITY, ST, ZIP	BEAVER CREEK OH
TITLE	B-
NAME	JOHNSON, WILLIAM R.-
STREET ADDRESS	607 E. BELLE AVE.
CITY, ST, ZIP	MILWAUKEE WI

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	DELETE
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	DELETE
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with my address.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Additional Names & Addresses of Each Officers

Treasurer	Jerome F. Miceli 250 Park Avenue South, Ste 200 Winter Park, FL 32789	ADD
Secretary	Stephen A. Saker 250 Park Avenue South, Ste 200 Winter Park , FL 32789	ADD
Asst. Secretary	Nancey M. McMurtry 250 Park Avenue South, Ste 200 Winter Park, FL 32789	
Asst. Treasurer	Sheri M. Cuff 250 Park Avenue South, Ste 200 Winter Park, FL 32789	