## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 08 1998 8:00am

Secretary of State

Change

\_\_\_ Addition

Addition

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400034738 (2)

DAVID STEVENS, INC.

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

## Principal Place of Business Mailing Address 2775 N WICKHAM RD 1901 S HARBOR CITY BLVD **SUITE 710 STE A203** DO NOT WRITE IN THIS SPACE MELBOURNE FL 32901 MELBOURNE FL 32835 3. Date Incorporated or Qualified 04/29/1994 2. Principal Place of Business 2s. Mailing Address Applied For 26 59-3247296 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 25 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name STEVENS, DAVID A 1901 S HARBOR CITY BLVD Street Address (P.O. Box Number is Not Acceptable) **SUITE 710** 83 MELBOURNE FL 32901 84 City Zip Code 7.05.02 and 607-1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered obligations of Section 607.0505, Florida Statutes. 11. Pursuant to the provisions of soffice or registered agent, or agent. I am familiar with, applications of the control of th SIGNATURE (NOTE: Registered Agent signature re CERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE PTD 1.1 TITLE ☐ Change ☐ Addition NAME STEVENS. DAVID 12 NAME 2775 N WICKHAM RD STE #203 STREET ADDRESS 1.3 STREET ADDRESS MELBOURNE FL CITY-ST-ZIP 14 CHY-ST-ZIP DELETE Change Addition TITLE 21 TITLE STEVENS, KIMBERLY K NAME 22 NAME STREET ADDRESS 2775 N WICKHAM RD STE 203 23 STREET ADDRESS MELBOURNE FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 3 1 7 ITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Change Addition

14. Thereby certify that the information supplied with this filling 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 suppliemental 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 of the corporation of the corporation or the receiver of the corporation of the corporation

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 CITY-ST-ZIP

4.4 CITY - ST - ZIP