

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

FILED
Jun 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000038921 (0)**

1. Corporation Name

ALVERSON ENTERPRISES, INC.

Principal Place of Business

Mailing Address

**1704 N WICKHAM ROAD
MELBOURNE FL 32935
US**

**1704 N WICKHAM ROAD
MELBOURNE FL 32935
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/24/1994

4. FEI Number

65-0495374

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ALVAREZ, E M
1704 N WICKHAM ROAD
MELBOURNE FL 32935**

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  **President**

(NOTE: Registered Agent signature required when reinstating)

2/2/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **ALVAREZ, E. MARK**
CITY-ST-ZIP **1704 N WICKHAM ROAD
MELBOURNE FL**

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME **P**
1.3 STREET ADDRESS **ALVAREZ, E. MARK**
1.4 CITY-ST-ZIP **865 HAWSER ST N.E
PALM BAY, FL 32907**

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **WILLIAMSON, JAMES F**
CITY-ST-ZIP **1704 N WICKHAM ROAD
MELBOURNE FL**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **V**
2.3 STREET ADDRESS **Williamson, James F.**
2.4 CITY-ST-ZIP **865 HAWSER ST N.E
PALM BAY, FL 32907**

TITLE ☐ DELETE
NAME **T**
STREET ADDRESS **GEORGE UNDERWOOD LYON**
CITY-ST-ZIP **7000 20 ST #825
VERO BEACH, FL 32966-8975**

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME **T**
3.3 STREET ADDRESS **George Underwood Lyon**
3.4 CITY-ST-ZIP **7000 20 ST #825
VERO BEACH, FL 32966-8975**

TITLE ☐ DELETE
NAME **S**
STREET ADDRESS **Charles Etna Smith**
CITY-ST-ZIP **7000 20 ST #825
VERO BEACH, FL 32966-8975**

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME **S**
4.3 STREET ADDRESS **Charles Etna Smith**
4.4 CITY-ST-ZIP **7000 20 ST #825
VERO BEACH, FL 32966-8975**

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **BRAUNTON SMITH**
CITY-ST-ZIP **F.I.T. BOX 6316
Melbourne, FL 32901**

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME **D**
5.3 STREET ADDRESS **Braunton Smith**
5.4 CITY-ST-ZIP **F.I.T. BOX 6316 NA
Melbourne, FL 32901**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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; that I am the officer 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 of this report. I am attaching an affidavit with an address.

SIGNATURE 

2/2/98

(HND) 252-5700

**12/6/94
DEP \$150.00**

CR2E034 (10/97)