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Mar 10 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94000069631 (7)
1. Corporation Name
BMR CAPITAL, INC.

Principal Place of Business
4350 COLONIAL BLVD.
FORT MYERS FL 33912

Mailing Address
4350 COLONIAL BLVD.
FORT MYERS FL 33912



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/19/1994	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 65-0522171		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

MATHERLY, BLAKE
4350 COLONIAL BLVD.
FORT MYERS FL 33912

10. Name and Address of New Registered Agent

81 Name MICHAEL A. CARR
82 Street Address (P.O. Box Number is Not Acceptable)
116 MAGNOLIA AVENUE
83
84 City SEBRING FL 85 Zip Code 33870

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE *Michael Carr* DATE 2/23/98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPD	1.1 TITLE	P.D.
NAME	CARR, MICHAEL A	1.2 NAME	MICHAEL A. CARR
STREET ADDRESS	204 S. RIDGEWOOD DRIVE	1.3 STREET ADDRESS	116 MAGNOLIA AVE.
CITY-ST-ZIP	SEBRING FL 33870	1.4 CITY-ST-ZIP	SEBRING, FL 33870
TITLE	PD	2.1 TITLE	DELETE - NO LONGER INVOLVED
NAME	MATHERLY, BLAKE	2.2 NAME	
STREET ADDRESS	4350 COLONIAL BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	FORT MYERS FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	S.D.
NAME		3.2 NAME	CARDLYN S. CARR
STREET ADDRESS		3.3 STREET ADDRESS	116 MAGNOLIA AVE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	SEBRING, FL 33870
TITLE		4.1 TITLE	VP, T.D.
NAME		4.2 NAME	MIKE DROHAN
STREET ADDRESS		4.3 STREET ADDRESS	1002 TERRY DRIVE
CITY-ST-ZIP		4.4 CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32714
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Carolyn S Carr, Sec* 1-31-98 941-382-2726

CR2E034 (10/97)