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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1				036550 (8) EVELAND-67, INC.	ì		
Principal Place of Business Mailing Address  601 CLEARWATER PARK RD. 601 CLEARWATER PARK RD.							
'	WEST PALM BEACH FL 33401			WEST PALM BEACH FL 33401			
	US			US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
							05/09/1995
2. Principal Place of Business			2a. Mailing Address			4. FEt Number Applied For	
21			26			<b>59-33 19725</b> Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired  \$8.75 Additional Fee Required	
City & State			City & State			6. Election Campaign Financing \$5.00 May Be	
23	]	_		28			Trust Fund Contribution Added to Fees
	Zip	Country Zip		Country		8. This corporation owes or has paid the current year Intangible	
24	24 25 25 Name and Address of Current			29 30			Personal Property Tax due June 30. Yes No
H	W	ATSON, WILLIAM		egistered Agent	81	Name	
					82	Ctroot	ot Address (D.O. Dov. Niveshov in Not Associable)
WEST PALM BEACH FL 33401				02	Street	et Address (P.O. Box Number is Not Acceptable)	
				83			
					84	City	B5 Zip Code
44 Purplied to the provisions of Socience 607 0502 and 607 1509 Elected Clauses							FL   `
<ol> <li>Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the aboroffice or registered agent, or both, in the State of Florida. Such change was authorized bagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statute.</li> </ol>							orporation's board of directors. I hereby accept the appointment as registered
<u>ر</u> ا	•	ım t <b>a</b> mıllar with, ano	accept the obligatio	ns of, Section 607.0505, Fig	orida Statute:	<b>S</b> .	
ಿ	GNATURE	Signature, typed or printed			E: Registered Ag	ent signaturi	ture required when reinstating) DATE
12		No.	OFFICERS AND D		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
10	1	1	VELL W	☐ DELETE	1.1 TITLE 1.2 NAME		☐ Change ☐ Addition
					1.2 NAME 1.3 STREET ADDRESS		
1	IY-ST-ZIP				1.3 STREET		5
TIT		P	<u></u>	☐ DELETE	2.1 TITLE	77 - CII	☐ Change ☐ Addition
NA.	ME				2.2 NAME		
ST	REET ADDRESS	Suant to the provisions of Sections 607.050 to or registered agent, or both, in the State nt. I am familiar with, and accept the obligations of Sections 607.050 to or registered agent. I am familiar with, and accept the obligations of Sections 607.050 to or provided name of registered agent of Sections of			2.3 STREET	ADDRESS	s
-	IY-ST-ZIP		EACH FL 33401		2. 4 CITY-	ST-ZIP	
TIT	•		<b>n</b>	☐ DELET <b>E</b>	3.1 TITLE		L Change L Addition
ŀ	ME				3.2 NAME		
	REET ADDRESS				3.3 STREET		S
TH	Y-\$T-ZIP	S	EROIT IE GOTOT	DELETE	3.4. CITY-5	SI - ZIP	☐ Change ☐ Addition
	ME	WATSON, WIL	LIAM L		4. 2 NAME		
	REET ADDRESS				4.3 STREET		s
i i	Y-ST-ZIP				4.4 CITY - S		
TIT		VAS		DELETE	5.1 TITLE		Change Addition
NA	ME	MORRISON, A	nthony l		5.2 NAME		
ST	REET ADDRESS				5.3 STREET	ADDRESS	s
ÇIT	Y-ST-ZIP	WEST PALM B	EACH FL 33401		5.4 CITY - S	T-ZIP	
TIT				☐ DELETE	6.1 TITLE		Vice President
NA	ME				6.2 NAME		Kenneth M. Gamache
CT	TEET ADDRESS				a c ctorre	ABDDECO	AINII I'IAAMMATAY VAYV VAAA

CITY-ST-ZIP West Palm Beach, Florida 33401-6233

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 of 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 of an Magnment with an address.

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(561) 659-4122

**FILED** 

Feb 23 1998 8:00am

Secretary of State