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

DOCUMENT # P95000044921 (1)

VERONA HOUSE, INC.

FILED Apr 22 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					
201 SOUTH MAIN STREET 201 SOUTH MAIN STREET BROOKSVILLE FL 34601 BROOKSVILLE FL 34601					
SHOOKSHEE TE STOOT		BROOKSVILLE FE \$4001		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				06/12/1995	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3320249	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		27			Fee Required
		City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
24	25	├ ──┐	¬ ·	This corporation owes or has paid the operational Property Tax due June 30.	
241	9, Name and Address of Cu		101	10. Name and Address of New Registere	
HOGAN, THOMAS S JR. 81 Name					- rigotti
20 SOUTH BROAD STREET					
BROOKSVILLE FL 34601			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
BIOONOVILLE PL 34001			83		
			84 City	F	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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE					
12.	OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BOYD, ROBERT L		1.2 NAME		
STREET ADDRESS	201 S MAIN ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	B ROOKSVILLE FL		1.4 CITY - ST - ZIP		
TITLE	0000 44500 44	☐ DELET e	2.1 TITLE		Change Addition
NAME	BOYD, JANIS H		2.2 NAME	•	
STREET ADDRESS	201 S MAIN ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	B ROOKSVILLE FL	Pereze	2. 4 CITY - ST - ZIP		1 4 4 4 5 5
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP		Change
TITLE		[] DEFEIG	4.1 TITLE		Change Addition
NAME EXPERT ADDRESS			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY+ST+ZIP TITLE		DELETE	4.4 C(TY-ST-ZIP		Change Addition
NAME			5.1 TITLE		TT CHANGE THE WORKSON
STREET ADDRESS			5.2 NAME		
			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
				•	TT CHANGE TT MODIFIED
NAME PERFET ADODESC			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

4. 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

4/minu