

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

FILED  
Mar 24 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 # P96000074275 (4)  
1. Corporation Name  
DUNCAN DEVELOPMENT, INC.

Principal Place of Business 2617 N.W. 17TH LANE POMPANO BEACH FL 33064	Mailing Address 2617 N.W. 17TH LANE POMPANO BEACH FL 33064
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 698 COREY CAMPBELL RD. Suite, Apt. #, etc. 22 City & State FORT PIERCE, FL 23 Zip 34982 24 Country US		2a. Mailing Address 25 698 COREY CAMPBELL RD. Suite, Apt. #, etc. 26 City & State FORT PIERCE, FL 27 Zip 34982 28 Country US		3. Date Incorporated or Qualified 09/03/1996	
4. FEI Number 65-0691354		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		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

JOHN A DUNCAN  
148 NE 38TH ST  
SUITE 32  
OAKLAND FL 33334

10. Name and Address of New Registered Agent

81 Name JOHN A. DUNCAN	82 Street Address (P.O. Box Number is Not Acceptable) 698 COREY CAMPBELL RD.	83	84 City FORT PIERCE	85 Zip Code FL 34982
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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  (NOTE: Registered Agent signature required when re-registering) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHN A DUNCAN	1.2 NAME	
STREET ADDRESS	148 NE 38TH ST 32	1.3 STREET ADDRESS	
CITY-ST-ZIP	OAKLAND FL	1.4 CITY-ST-ZIP	
TITLE	DVPT	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THELMA J UNDERWOOD	2.2 NAME	
STREET ADDRESS	698 COREY CAMPBELL RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	FORT PIERCE FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 in an attachment with an address.

SIGNATURE: 

CR2E034 (10/97)