

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
May 22 1998 8:00am
Secretary of State

DOCUMENT # **P97000025683**

1. Corporation Name

DEVELOPMENTAL CONCEPTS, INC.

Principal Place of Business

**314 E ROMANA ST
PENSACOLA FL 32501
US**

Mailing Address

**314 E ROMANA ST
PENSACOLA FL 32501
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3-7-97

4. FEI Number

59-3440906

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

**4347 SUNSET BEACH BLVD
Suite, Apt. #, etc.**

2a. Mailing Address

**4347 SUNSET BEACH BLVD
Suite, Apt. #, etc.**

City & State

NICEVILLE, FLORIDA 32578

City & State

NICEVILLE, FLORIDA 32578

Zip

32578

Country

OKALOOSA

Zip

32578

Country

OKALOOSA

9. Name and Address of Current Registered Agent

**VUCOVICH, HAROLD J
314 E ROMANA ST
PENSACOLA FL 32501**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

4347 SUNSET BEACH BLVD

83

84 City **NICEVILLE**

FL

85 Zip Code **32578**

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

TITLE NAME ☐ DELETE

**P
VUCOVICH, HAROLD J
314 E ROMANA ST
PENSACOLA FL**

TITLE NAME ☐ DELETE

**V
WRIGHT, LARRY
8080 LAVELLA WAY
PENSACOLA FL 32528**

TITLE NAME ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE NAME ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE NAME ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE NAME ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

**VUCOVICH, HAROLD J.
4347 SUNSET BEACH BLVD.
NICEVILLE, FL 32578**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

3000002536433

-05/27/98--01039--038

*****150.00**

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:

HAROLD J. VUCOVICH 5/1/98 (85D) 897-0591

CR2F034 (10/97)