

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

FILED
Jun 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Motham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000103105 (7)

1. Corporation Name
BEVAN & CO. INC.

Principal Place of Business
1200 MASANABO LANE
FT MYERS FL 33919

Mailing Address
1200 MASANABO LANE
FT MYERS FL 33919



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 5876 Enterprise Pkwy Suite, Apt. #, etc. 22 #B City & State 23 Fort Myers Fla Zip 24 33905 Country 25 Lee		2a. Mailing Address 26 (See above) Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30		3. Date Incorporated or Qualified 12/04/1997	
		4. FEI Number 650800526		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	

9. Name and Address of Current Registered Agent BEVAN, ANDREW 1200 MASANABO LANE FT MYERS FL 33919		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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 reinstating) DATE: 4/29/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	
NAME	BEVAN, ANDREW	1.2 NAME	
STREET ADDRESS	1200 MASANABO LANE	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT MYERS FL 33919	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	
NAME	BEVAN, BRIAN	2.2 NAME	
STREET ADDRESS	1200 MASANABO LANE	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT MYERS FL 33919	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	
NAME	BEVAN, JANE	3.2 NAME	
STREET ADDRESS	1200 MASANABO LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT MYERS FL 33919	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	BEVAN, LISA	4.2 NAME	
STREET ADDRESS	1200 MASANABO LANE	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT MYERS FL 33919	4.4 CITY-ST-ZIP	
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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE: 4/29/98 941-939-4900 0008893

CR2E034 (10/97)