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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000012079

1. Corporation Name DEV-COUR, INC.

## **FILED** Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90217 047 \*\*\*150.00



| Principal Place of Business  | Mailing Address                                   |                       |  |
|--|---|-----------------------|--|
| 10244 ATLANTIC BOULEVARD<br>JACKSONVILLE FL 32225  | 10244 ATLANTIC BOULEVARD<br>JACKSONVILLE FL 32225 |                       | DO NOT WRITE IN THIS SPACE   |
|  |   |                       | 3. Date Incorporated or Qualifed 02/06/1998  |
| 2. Principal Place of Business   | 2a. Mailing Address                               |                       | 4, FEI Number Applied For  |
| ril in the second second   | 26  |                       | 59-3492678 Not Applicable  |
| Suite, Apt. #, etc.  | Suite, Apt. #, etc.                               |                       | 5. Certifcate of Status Desired   \$8.75 Additional Fee Required   |
| City & State   | City & State                                      |                       | 6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution  \$5.00 May Be Added to Fees  |
| Zip Country  |   | untry                 | 8. This corporation owes the current year Intangible Personal Property Tax.  |
| 9 Name and Address of Curre  |   | Τ                     | 10. Name and Address of New Registered Agent   |
|  |   | 81 Name               |  |
| DEVANEY, JANE<br>10244 ATLANTIC BOULEVARD  |   | 82 Street Addre       | ess (P.O. Box Number is Not Acceptable)  |
| JACKSONVILLE FL 32225  |   | 83                    |  |
|  |   | 84 City               | FL 85 Zip Code   |
| 11. Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligations of the control o | of Florida. Such change was authorize             | ed by the corporation | pration submits this statement for the purpose of changing its registered<br>n's board of directors. I hereby accept the appointment as registered |

SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. ☐ Change ☐ Addition PSTD DELETE 1.1 TITLE TITLE DEVANEY, JANE 1.2 NAME NAME 3916 PETITE DRIVE WEST 1,3 STREET ADDRESS STREET ADDRESS JACKSONVILLE BEACH FL 32250 1,4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ DELETE TITLE 2.1 TITLE COURSEY, PATSY A 2.2 NAME NAME 3916 PETITE DRIVE WEST 2.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE BEACH FL 32250 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition [ ] DELETE 4.1 TITLE TILE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 C/TY+ST-7IP CITY+ST-ZiP 6.1 TITLE ☐ Change Addition ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CRTY-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, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)