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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(7)

LEVETA N GERHARD PA

2. Principal Place of Business

Suite, Apt. #, etc.

City & Stale

21

22

23

Zip

Principal Place of Business Mailing Address 1712 ORANGE AVE. FT. PIERCE FL 34950-3869

Country

9. Name and Address of Current Registered Agent

25

POST OFFICE BOX 1539 FT. PIERCE FL 34954

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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**FILED** May 11 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE Date Incorporated or Qualified

🔏 Yes

This corporation owes or has paid the current year Intangible

4-28.98 561-489-9515

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ No

Not Applicable

07/23/1991

89-3007965

5. Certificate of Status Desired

Trust Fund Contribution

Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

4. FEI Number

1712 ORANGE AVE. FT. PIERCE FL 33454			1	140110			
			82	82 Street Address (P.O. Box Number is Not Acceptable)			
<b>,</b> , ,	TIEROE I E SOSOT		83				
			64	City		FL 65 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE							
Signature, tyried or printed name of rigistered agent and title if applicable (NOTE: Registored Agent signature required when reinstating) DATE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
12.	OFFICERS AND DIRECTORS	DELETE 1.1		<del></del> 1	ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE	GERHARD, LEVETA N.		TITLE	ì		Criange	
NAME	1712 ORANGE AVE.		NAME				l
STREET ADDRESS	FT. PIERCE FL			ADDRESS	•		
CITY-ST-ZIP			CITY - ST	-ZIP		Change	Addition
TITLE			TITLE	ļ		Change	Municipal Auguston
NAME			NAME	i			
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP			CITY-S	[-ZIP		0	1 4 2 2 2 2 2 2 2
TITLE	L.J		TITLE	ļ		Change	Addition
NAME .		I	MAME				
STREET ADDRESS		3.3	STREET	ADDRESS			
CITY-ST-ZIP			CITY-S	-ZIP			
TITLE	LJ	DELETE 4.1	TITLE	- [		L Change	Addition
NAME		4.2	NAME	i			
STREET ADDRESS		4.3	STREET	NODRESS			
CITY-ST-ZIP			CITY - ST	- ZIP			
TOLE	L	DELETE 51	TITLE	- [		L Change	Addition
NAME		5.2	NAME	i			
STREET ADDRESS		5.3	STREET A	ADDRESS			
CITY-ST-ZIP			CITY-ST	- ZIP			
TITLE		DELETE 6.1	TITLE	ĺ		Change	Addition
NAME		6.2	NAME	ì			
STREET ACORESS	i	6.3	STREET A	NOORESS			
CITY-ST-ZIP			CITY-ST				
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 of the receiver or trusted embewered 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.  **CENNATION**  **CENNATION							

Country

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