

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

FILED

May 06 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **V48088** (1)  
1. Corporation Name  
**B.S. PERRY INC.**



Principal Place of Business <b>4100 EVANS AVE SUITE 14 FT MYERS FL 33901</b>	Mailing Address <b>4100 EVANS AVE SUITE 14 FT MYERS FL 33901</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 1940 RICARDO AVE</b> Suite, Apt. #, etc.		2a. Mailing Address <b>26 1940 RICARDO AVE</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>07/07/1992</b>	
22 City & State <b>23 FT. MYERS, FL</b> Zip <b>24 33901</b> Country <b>25 USA</b>		27 City & State <b>28 FT MYERS FL</b> Zip <b>29 33901</b> Country <b>30 USA</b>		4. FEI Number <b>65-0343604</b> Applied For Not Applicable	
g. Name and Address of Current Registered Agent <b>PERRY, BRUCE E 4100 EVANS AVENUE, SUITE 14 FT. MYERS FL 33901</b>				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
10. Name and Address of New Registered Agent				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				81 Name 82 Street Address (P.O. Box Number is Not Acceptable) <b>1940 RICARDO AVE.</b> 83 84 City <b>FT. MYERS</b> FL 85 Zip Code <b>33901</b>	

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>P</b>	<input type="checkbox"/> DELETE	1.1 TITLE <b>12 NAME</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>PERRY, BRUCE E</b>		1.3 STREET ADDRESS <b>1940 RICARDO AVE</b>	
STREET ADDRESS <b>4100 EVANS AVENUE, SUITE 14</b>		1.4 CITY - ST - ZIP	
CITY - ST - ZIP <b>FT. MYERS FL 33901</b>		2.1 TITLE <b>2.2 NAME</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>VP</b>	<input type="checkbox"/> DELETE	2.3 STREET ADDRESS <b>1940 RICARDO AVE.</b>	
NAME <b>PERRY, SHERRY L</b>		2.4 CITY - ST - ZIP	
STREET ADDRESS <b>4100 EVANS AVENUE, SUITE 14</b>		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY - ST - ZIP <b>FT. MYERS FL 33901</b>		3.2 NAME	
TITLE	<input type="checkbox"/> DELETE	3.3 STREET ADDRESS	
NAME		3.4 CITY - ST - ZIP	
STREET ADDRESS		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY - ST - ZIP		4.2 NAME	
TITLE	<input type="checkbox"/> DELETE	4.3 STREET ADDRESS	
NAME		4.4 CITY - ST - ZIP	
STREET ADDRESS		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY - ST - ZIP		5.2 NAME	
TITLE	<input type="checkbox"/> DELETE	5.3 STREET ADDRESS	
NAME		5.4 CITY - ST - ZIP	
STREET ADDRESS		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY - ST - ZIP		6.2 NAME	
TITLE	<input type="checkbox"/> DELETE	6.3 STREET ADDRESS	
NAME		6.4 CITY - ST - ZIP	
STREET ADDRESS			
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:

*Bruce Perry*

*4-28-98 (941)939-9000*

CR2E034 (10/97)