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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V62030

(4)

FILED Jan 28 1998 8:00am Secretary of State

VERNCAR, INC. Principal Place of Business Mailing Address 1040 JENSEN BEACH BLVD 14399 SOUTHWEST SANDWEDGE DRIVE JENSEN BEACH FL 34957 INDIANTOWN FL 34956 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/03/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0359826 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Ζip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SCHOETZIG, WERNER B. 81 Name 14399 S.W. SANDWEDGE DRIVE Street Address (P.O. Box Number is Not Acceptable) INDIANTOWN FL 34956 83 84 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. 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 PD DELETE 1.1 TITLE Change Addition SCHOETZIG, WERNER B. NAME 1.2 NAME 14399 S.W. SANDWEDGE DR. STREET ADDRESS 1.3 STREET ADDRESS INDIANTOWN FL CITY-ST-ZIP 1.4 CITY - ST - 7/P DELETE Change TITLE 2.1 TITLE Addition SCHOETZIG, CARMEN P. NAME 2.2 NAME 14399 S.W. SANDWEDGE DR. STREET ADDRESS 2.3 STREET ADDRESS INDIANTOWN FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE 3.1 TITLE Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change TITLE Addition 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 tiling 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 aprual/peport 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 if the receiver or further 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 an attachment with an address.

**SIGNATURE:** 

REONETHER Schools 1/20/98 (561)33