

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

FILED
Apr 24 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 129811 (6)
1. Corporation Name
N. GOLDRING CORPORATION

Principal Place of Business Mailing Address
675 SO PACE BLVD. 675 SO PACE BLVD.
PENSACOLA FL 32501 PENSACOLA FL 32501



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/28/1934	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-0266015	
22	City & State	27	City & State	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24	Country	29	Country	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 GREEN, C A 675 SOUTH PACE BLVD. PENSACOLA FL 32501				10. Name and Address of New Registered Agent			
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)			
83				84 City			
85 Zip Code				86			

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]* *Joseph A Wanek* *4/6/98*
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	☐ DELETE		1.1 TITLE	☐ Change ☐ Addition		
NAME	GOLDRING, WILLIAM A			1.2 NAME			
STREET ADDRESS	2811 TOULOUSE ST			1.3 STREET ADDRESS			
CITY-ST-ZIP	NEW ORLEANS, LA 00000			1.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE		2.1 TITLE	☐ Change ☐ Addition		
NAME	GIENSCHLAG, CLYDE			2.2 NAME			
STREET ADDRESS	2811 TOULOUSE ST			2.3 STREET ADDRESS			
CITY-ST-ZIP	NEW ORLEANS, LA 00000			2.4 CITY-ST-ZIP			
TITLE	VD	☐ DELETE		3.1 TITLE	☐ Change ☐ Addition		
NAME	GREEN, C A			3.2 NAME			
STREET ADDRESS	675 S PACE BLVD			3.3 STREET ADDRESS			
CITY-ST-ZIP	PENSACOLA, FL 00000			3.4 CITY-ST-ZIP			
TITLE	V	☐ DELETE		4.1 TITLE	☐ Change ☐ Addition		
NAME	WANKE, JOSEPH A.			4.2 NAME			
STREET ADDRESS	675 S. PACE BLVD.			4.3 STREET ADDRESS			
CITY-ST-ZIP	PENSACOLA FL			4.4 CITY-ST-ZIP			
TITLE	VD	☐ DELETE		5.1 TITLE	☐ Change ☐ Addition		
NAME	FINE, PAUL			5.2 NAME			
STREET ADDRESS	2811 TOULOUSE STREET			5.3 STREET ADDRESS			
CITY-ST-ZIP	NEW ORLEANS LA			5.4 CITY-ST-ZIP			
TITLE	ST	☐ DELETE		6.1 TITLE	☐ Change ☐ Addition		
NAME	JANUSA, ALBERT			6.2 NAME			
STREET ADDRESS	2811 TOULOUSE STREET			6.3 STREET ADDRESS			
CITY-ST-ZIP	NEW ORLEANS LA			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: *C A Green* *4/6/98* *429-7000*

CR2E034 (10/97)