

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

FILED
Mar 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mertham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 320932 (7)

1. Corporation Name
ABC RESEARCH CORPORATION



Principal Place of Business C/O CHARLES I. HOLDEN, JR. 2700-C NW 43RD ST GAINESVILLE FL 32606	Mailing Address C/O CHARLES I. HOLDEN, JR. 2700-C NW 43RD ST GAINESVILLE FL 32606
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt #, etc 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt #, etc 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 09/14/1967	4. FEI Number 59-1198951	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent

**HOLDEN, CHARLES I. JR.
 2700 NW 43RD STREET, SUITE C
 GAINESVILLE FL 32606**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		
TITLE	DV	<input type="checkbox"/> DELETE
NAME	BROWN, AGNES F.	
STREET ADDRESS	3437 SW 24TH AVENUE	
CITY-ST-ZIP	GAINESVILLE, FL 00000	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	MCCGULLOUGH, WILLIAM E	
STREET ADDRESS	3437 S.W. 24TH AVE.	
CITY-ST-ZIP	GAINESVILLE, FL 00000	
TITLE	S	<input type="checkbox"/> DELETE
NAME	HOLDEN, CHARLES I JR	
STREET ADDRESS	3437 SW 24TH AVENUE	
CITY-ST-ZIP	GAINESVILLE, FL 00000	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BROWN, RICHARD L.	
STREET ADDRESS	3437 SW 24TH AVENUE	
CITY-ST-ZIP	GAINESVILLE, FL 00000	
TITLE	PTD	<input type="checkbox"/> DELETE
NAME	BROWN, WILLIAM L	
STREET ADDRESS	3437 SW 24TH AVENUE	
CITY-ST-ZIP	GAINESVILLE, FL 00000	
TITLE	V	<input type="checkbox"/> DELETE
NAME	DODD, WAYNE	
STREET ADDRESS	3437 SW 24TH AVENUE	
CITY-ST-ZIP	GAINESVILLE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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: *William R Brown* 3/5/98 352 372-0436

CR2E034 (10/97)