

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

FILED
 Mar 25 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 476818 (0)
 1. Corporation Name
GLATTING JACKSON KERCHER ANGLIN LOPEZ RINEHART, INC.

Principal Place of Business 33 E PINE STREET ORLANDO FL 32801-2607	Mailing Address 33 E PINE STREET ORLANDO FL 32801-2607
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DO NOT WRITE IN THIS SPACE

21 Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
25 Country	30 Country

3. Date Incorporated or Qualified 05/27/1975	
4. FEI Number 59-1594244	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
6. 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
CROWELL, PATRICK C.
320 N. MAGNOLIA AVE.
SUITE B-9
ORLANDO FL 32801

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

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	KERCHER, WILLIAM C. JR.	
STREET ADDRESS	9750 PISA DRIVE, APT #316	
CITY-ST-ZIP	ORLANDO FL	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	ANGLIN, WILLIAM J., JR.	
STREET ADDRESS	350 SENACCA TRAIL	
CITY-ST-ZIP	MAITLAND FL	
TITLE	VTD	<input type="checkbox"/> DELETE
NAME	LOPEZ, SERGIO R.	
STREET ADDRESS	629 MARINER WAY	
CITY-ST-ZIP	ALTAMONTE SPRINGS, F	
TITLE	CD	<input type="checkbox"/> DELETE
NAME	GLATTING, JACK F.	
STREET ADDRESS	105 RED BAY	
CITY-ST-ZIP	LONGWOOD FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	RINEHART, JOHN F.	
STREET ADDRESS	17835 SEIDNER ROAD	
CITY-ST-ZIP	WINTER GARDEN FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	JACKSON, TIMOTHY T.	
STREET ADDRESS	1397 S RIDGE LAKE CIR	
CITY-ST-ZIP	LONGWOOD FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
2. NAME	7 Kercher, William C. Jr.
1.3 STREET ADDRESS	712 S. Lake Adair Blvd
1.4 CITY-ST-ZIP	Orlando, FL 32804
2.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
6.2 NAME	400002467624
6.3 STREET ADDRESS	-03/25/98--01005--018
6.4 CITY-ST-ZIP	***158.75

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 a replacement with an address.

SIGNATURE: *[Signature]* Jack Glattling 3/17/98 407-843-6502

CR2E034 (10/97)