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

## **PROFIT CORPORATION** ANNUAL REPORT 1998

TITLE

NAME STREET ADDRESS

TITLE

NAME

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

| DOCUMENT # F55215 (0) ARCH & ASSOCIATES, INC.   |   |  |                     |                    |                  |  |
|---|---|--|---------------------|--------------------|------------------|--|
| Principal Place of Business Mailing Ac  |   |  | Address             |                    |                  | - T HOUSE THE DATE BANK THE TOTAL PART OF THE PROPERTY OF THE PARTY OF |
| C/O RUTH /<br>190 E MORS<br>WINTER PAR  | E BLVD  | 1711 VIA TUSCANY<br>WINTER PARK FL 32789<br>US |                     |                    |                  | DO NOT WRITE IN THIS SPACE   |
| US  |   |  |                     |                    |                  | 3. Date Incorporated or Qualified  |
| 2 Principal   | Place of Business                                 | a. Mailing Address                             | 2a. Mailing Address |                    |                  | 11/16/1981<br>4. FEI Number Applied For  |
| 21  | i ipop of bosiness                                | <u> </u>                                       | 26                  |                    |                  | 59-2304900 Not Applicable  |
| Suite, Apt  | . #, etc.   | Suite, Apt. #, etc.                            | Suite, Apt. #, etc. |                    |                  | 5. Certificate of Status Desired \$8.75 Additional Fee Required  |
| City & Sta  |   | City & State                                   | 28                  |                    |                  | Election Campaign Financing     Trust Fund Contribution     Added to Fees  |
| Zip   | Country   | Zip  | —                   | Country            |                  | 8. This corporation owes or has paid the current year Intangible   |
| 24  | 25  | 29   | 30                  | <u> </u>           |                  | Personal Property Tax due June 30. Yes No  |
| 9. Name and Address of Current Registered Agent   |   |  |                     | 81                 | Name             | 10. Name and Address of New Registered Agent   |
| RUTH A ARCH<br>190 E MORSE BLVD<br>WINTER PARK FL 32789   |   |  |                     | 82 Street A        |                  | dress (P.O. Box Number is Not Acceptable)  |
|   |   |  |                     | 84                 | City             | FL 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   | Signature, typed or printed name of registered as |  |                     |                    |                  | guired when reinstating) DATE  |
| 12.   |   | ND DIRECTORS                                   | 13.                 | a Age              | nt signature rec | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  |
| TITLE   |   |  | 1.1 1               | ITLE               | 7~~              | Change Addition  |
| NAME  | ARCH, VINCENT, J                                  |  | 1.2 N               | IAME               |                  |  |
| STREET ADDRESS  | 4504 450 5040 5040                                |  | 1.3 S               | 1.3 STREET ADDRESS |                  |  |
| CITY-ST-ZIP   | WINTER PARK FL                                    |  | 1.4 (               | 1,4 CITY-ST-ZIP    |                  |  |
| TITLE   | PD  | ☐ DELETE                                       | 2.1 T               | ITLE               |                  | ☐ Change ☐ Addition  |
| NAME  |   |  | 2.2 N               | AME                | 1                |  |
| STREET ADDRESS  |   |  | 2.3 S               | 2.3 STREET ADDRESS |                  | , i  |
| CITY-ST-ZIP   | WINTER PARK FL                                    |  | _                   | 2 4 CITY-S1-Z      |                  |  |
| TITLE   | DELETE 3  |  |                     | TITLE              |                  | Change Addition  |
| NAME  |   |  | 3.2 N               |                    |                  |  |
| STREET ADDRESS  |   |  |                     |                    | ADDRESS          |  |
| CITY - ST., 7IP   | 1   |  | 34 (                | PITY - 9           | T. 7/P           |  |

CITY-ST-ZIP 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 quanged, and appears with an address.

4.1 TITLE

4.2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZiP

4.4 CITY - ST - ZIP

DELETE

DELETE

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**FILED** 

Mar 10 1998 8:00am

Secretary of State

407-142000

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