## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #
1. Corporation Name

(3)

WILLIAMS, BRYANT, GAUTIER & DONOHUE, P.A.

Principal Plac	e of Business	Mailing Address		1 (05)(05)(10 (01) (00)	11 1511 01011 01011 01011 01011 01011 01011	
306 E. COLLEG P. O. BOX 116 TALLAHASSEE	59	306 E. COLLEGE AVENUE P. O. BOX 1169 TALLAHASSEE FL 32301			E IN THIS <b>S</b> PACE	
				3. Date Incorporated or Qualified		
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		08/31/1982		
2. Principal F	Piace of Business Delta Boulevard	2a. Malling Address 26 2010 Delta Bo	oulevard	4. FEI Number 59-2213062	Applied For Not Applicable	
	Box 4128 ( 412.8	Suite, Apt. #, etc. 27 P.O. Box 4128	8 (32215- 412	E. Carliffords of Olatics Desired	\$8.75 Additional Fee Required	
City & State	hassee, FL	City & State Tallahassee,	FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has pa	id the current year Intangible	
24 32303	25	29 32303	0	Personal Property Tax due June		
					10. Name and Address of New Registered Agent	
WILLIAMS, L. LEE JR. 306 EAST COLLEGE AVE. TALLAHASSEE FL 32301			82 Street	fliams, L. Iee, Jr. at Address (P.O. Box Number is Not Acceptable) 10 Delta Boulevard		
			84 Tal:	lahassee	FL 85 Zin Code 32303	
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 profiled name of registered agent and till of applicable (NOTE: Registered Agent signature required when reinstating)  DATE						
Signature, typed or printed name of registered ager and title if applicable (NOTE: Registered Age  12. OFFICERS AND DIRECTORS  13.				alure required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PAD	DELETE	1.1 TITLE	bler Diceter	Change Addition	
NAME	WILLIAMS, L. LEE, JR.	[_] DECE IE	1.2 NAME	ties Directes	E- Change    Addition	
STREET ADDRESS	306 EAST COLLEGE AVE.		1.3 STREET ADDRESS	2010 Delta Boulevard		
CITY-ST-ZIP	TALLAHASSEE FL		1.4 CITY-ST-ZIP	Tallahassee, FL		
TITLE	VID	DELETE	2.1 TITLE	141144455557 111	Change Addition	
NAME	WILLIAMS, F. PALMER		2.2 NAME		J	
STREET ADDRESS	306 EAST COLLEGE AVE.	i	2.3 STREET ADDRESS	2010 Delta Boulevard		
CITY-ST-ZIP	TALLAHASSEE FL		2.4 CiTY-ST-ZIP	Tallahassee, FL		
TITLE	VD	X DELETE	3.1 TITLE		Change Addition	
NAME	BRYANT, FREDERICK M.		3.2 NAME			
STREET ADDRESS	306 EAST COLLEGE AVE.		3.3 STREET ADDRESS			
CITY-ST-ZIP	TALLAHASSEE FL		3.4 CITY-ST-ZIP		·····	
TITLE	VOJA Secretary	DELETE	4.1 TITLE	Vice-Pres	Change Addition	
NAME	GAUTIER, RUSSELL D &		4.2 NAME	Sec Directa		
STREET ADDRESS	306 EAST COLLEGE AVE.		4.3 STREET ADDRESS	2010 Delta Boulevard		
CITY-ST-ZIP	TALLAHASSEE FL		4.4 CITY-ST-ZIP	Tallahassee, FL		
TITLE	VD	DELETE	5.1 TITLE		Change Addition	

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 changed, or op an attachment with an address.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

850-386-3300

**FILED** 

Sep 02 1998 8:00am

Secretary of State

NAME

NAME

CITY-ST-ZIP TITLE

STREET ADDRESS

STREET ADDRESS

DONOHUE, JAMES M.

306 E COLLEGE AVE

TALLAHASSEE FL

LEE WILLLAMS, JR.

8-25-98

Change Addition