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FILED  
Jan 27 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 # H93747 (4)

1. Corporation Name  
SUDDATH DSC, INC.

Principal Place of Business  
5883 DOOLITTLE RD  
5288 HIGHWAY AVENUE  
JAX FL 32254  
US

Mailing Address  
P O BOX 48088  
JAX FL 32207  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/14/1986

4. FEI Number

59-2656444

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

PRICE, R.J.  
815 S. MAIN ST.  
JACKSONVILLE FL 32207

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 607.0502 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 agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P  
NAME SPINNEY, JAMES  
STREET ADDRESS 5883 DOOLITTLE RD.  
CITY-ST-ZIP JACKSONVILLE FL

☐ DELETE

TITLE D  
NAME BELL, A.Q.  
STREET ADDRESS 815 S. MAIN ST.  
CITY-ST-ZIP JACKSONVILLE FL

☐ DELETE

TITLE VTD  
NAME PRICE, R.J.  
STREET ADDRESS 815 S MAIN ST  
CITY-ST-ZIP JACKSONVILLE FL

☐ DELETE

TITLE SD  
NAME STRICKLAND, BARBARA S.  
STREET ADDRESS 815 S. MIAN ST  
CITY-ST-ZIP JACKSONVILLE FL

☐ DELETE

TITLE AS  
NAME BARNETT, JAMES G.  
STREET ADDRESS 815 S. MAIN STREET  
CITY-ST-ZIP JACKSONVILLE FL

☐ DELETE

TITLE CD  
NAME SUDDATH, STEPHEN M.  
STREET ADDRESS 815 S. MAIN ST.  
CITY-ST-ZIP JACKSONVILLE FL

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 in an attachment with an address.

SIGNATURE Robert J Price 01/19/98 01/13/98 7:10P

CR2E034 (10/97)