

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

FILED

**May 01 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 # K34421 (3)
1. Corporation Name
NOTAMI (CLEARWATER), INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business ONE PARK PLAZA NASHVILLE TN 37203 US	Mailing Address PO BOX 750 ATTN: TAX DEPT. NASHVILLE TN 37202 US
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3. Date Incorporated or Qualified
09/27/1988

21. Principal Place of Business Suite, Apt. #, etc.	22. City & State	23. Zip	24. Country	25.	26. Mailing Address Suite, Apt. #, etc.	27. City & State	28. Zip	29. Country	30.
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4. FEI Number
95-1404364

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

9. Name and Address of Current Registered Agent
**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P WANDEWATER, DAVID	<input checked="" type="checkbox"/> DELETE	1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ONE PARK PLAZA		1.2 NAME		
STREET ADDRESS	NASHVILLE TN		1.3 STREET ADDRESS		
CITY-ST-ZIP			1.4 CITY-ST-ZIP		
TITLE	DVS BRAUN, STEPHEN T	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ONE PARK PLAZA		2.2 NAME	Blackwood, Dora A.	
STREET ADDRESS	NASHVILLE TN		2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE	DVT DONAHAY, KENNETH	<input type="checkbox"/> DELETE	3.1 TITLE	DSVAT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ONE PARK PLAZA		3.2 NAME	Donahay, Kenneth	
STREET ADDRESS	NASHVILLE TN		3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE	V FRANCK, JOHN M	<input type="checkbox"/> DELETE	4.1 TITLE	DVPS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ONE PARK PLAZA		4.2 NAME		
STREET ADDRESS	NASHVILLE TN		4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE	DV ELTON, ROSALYN	<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ONE PARK PLAZA		5.2 NAME		
STREET ADDRESS	NASHVILLE TN		5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE	V JOHNSON, R. M	<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ONE PARK PLAZA		6.2 NAME		
STREET ADDRESS	NASHVILLE TN		6.3 STREET ADDRESS		
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 on an attachment with an address _____

SIGNATURE *[Signature]* **4-23-98**

CR2E034 (10/97)