

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

FILED

98 AUG 31 PM 4:05

SECRETARY OF STATE TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

DOCUMENT # L14386 (1) 1. Corporation Name EGDC - CONCOURSE, INCORPORATED

Principal Place of Business C/O CT CORPORATION SYSTEM 660 E. JEFFERSON TALLAHASSEE FL 32302 US Mailing Address C/O CT CORPORATION SYSTEM 660 E. JEFFERSON TALLAHASSEE FL 32302 US

3. Date Incorporated or Qualified 09/08/1989 4. FEI Number 22-3001580 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 24 Country 25 26 Mailing Address 27 Suite, Apt. #, etc. 28 City & State 29 Zip 30 Country

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 660 E. JEFFERSON TALLAHASSEE FL 32302

10. Name and Address of New Registered Agent 81 Name CT Corporation System 82 Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Rd. 83 84 City Plantation FL 85 Zip Code 32324

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 607.0502, Florida Statutes.

SIGNATURE Connie Bays SPECIAL ASSISTANT SECRETARY DATE 8/31/98

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Rows include VDI LUDLOW, MADELEINE; PD EILEEN A MORAN; S BIGGINS JR., EDWARD J.; DVS BRADSHAW, PAUL T.

Table with 4 columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP. Rows include Director: VP & Treasurer Joan C. MacDonald; 100002635221-0 -09/09/98-01043-013 \*\*\*\*550.00 \*\*\*\*550.00

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: Eileen A Moran 973 456 3560