

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

FILED

**May 07 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 # M84971 (4)
1. Corporation Name
DJU OF THE SUNCOAST, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 1904 MADEIRA WAY P.O. BOX 8576 MADEIRA BCH. FL 33708		Mailing Address 15044 MADEIRA WAY P.O. BOX 8576 MADEIRA BCH. FL 33708	
21 Principal Place of Business	26 Mailing Address	22 Suite, Apt. #, etc	27 Suite, Apt. #, etc
23 City & State	28 City & State	24 Zip	29 Zip
25 Country	30 Country		

3. Date Incorporated or Qualified 06/10/1988	Applied For <input type="checkbox"/> Not Applicable
4. FEI Number 23-2504172	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**HARTMAN, TODD
15044 MADEIRA WAY
MADEIRA BEACH FL 33708**

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, 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: *Todd Hartman (Vice President)* DATE: **4-29-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	P
NAME	HARTMAN, RANDALL	12 NAME	HARTMAN RANDALL
STREET ADDRESS	905 HAWTHORNE AVE	13 STREET ADDRESS	730 ASHFIELD DRIVE
CITY-ST-ZIP	MECHAWICHBURG PA	14 CITY-ST-ZIP	FAYETTEVILLE, NC 28311
TITLE	V	21 TITLE	
NAME	HARTMAN, TODD	22 NAME	
STREET ADDRESS	15044 MADEIRA WAY	23 STREET ADDRESS	
CITY-ST-ZIP	MADEIRA BCH. FL	24 CITY-ST-ZIP	
TITLE		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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 officer 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: *Todd Hartman (Vice President)* DATE: **4-29-98** (813)392-3285

CR2E034 (10/97)