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FILED
May 18 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 # P93000014243 (8)

1. Corporation Name
THOMPSON GOODIS & THOMPSON, A PROFESSIONAL ASSOCIATION

Principal Place of Business	Mailing Address
600 1ST AVE. NORTH ST. PETERSBURG FL 33701	600 1ST AVE. NORTH ST. PETERSBURG FL 33701

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/01/1993

2. Principal Place of Business	2a. Mailing Address
21 333 Third Avenue North	26 Post Office Box 90
Suite, Apt. #, etc. 22 4th Floor	Suite, Apt. #, etc. 27
City & State 23 St. Petersburg, FL	City & State 28 St. Petersburg, FL
Zip / Country 24 33701 / 25 U.S.A.	Zip / Country 29 33731 / 30 U.S.A.

4. FEI Number: 59-3161924 ☐ 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	10. Name and Address of New Registered Agent
GOODIS, JEFFREY M 600 FIRST AVE. NORTH ST. PETERSBURG FL 33701	81 Name: Jeffrey M. Goodis 82 Street Address (P.O. Box Number is Not Acceptable): 333 Third Avenue North 83: 4th Floor 84 City: St. Petersburg FL 85 Zip Code: 33701

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☐ DELETE	1.1 TITLE	address	☒ Change ☐ Addition
NAME	THOMPSON, JAMES B		1.2 NAME		
STREET ADDRESS	600 1ST AVE. NORTH		1.3 STREET ADDRESS	333 Third Avenue North - 4th Floor	
CITY-ST-ZIP	ST. PETERSBURG FL 33701		1.4 CITY-ST-ZIP	St. Petersburg, FL 33701	
TITLE	DVST	☐ DELETE	2.1 TITLE	address	☒ Change ☐ Addition
NAME	GOODIS, JEFFREY M		2.2 NAME		
STREET ADDRESS	600 1ST AVE. NORTH		2.3 STREET ADDRESS	333 Third Avenue North - 4th Floor	
CITY-ST-ZIP	ST. PETERSBURG FL 33701		2.4 CITY-ST-ZIP	St. Petersburg, FL 33701	
TITLE		☐ DELETE	3.1 TITLE	VS	☐ Change ☒ Addition
NAME			3.2 NAME	Thompson Jr, James B.	
STREET ADDRESS			3.3 STREET ADDRESS	333 Third Avenue North - 4th Floor	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	St. Petersburg, FL 33701	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (10/97)

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: _____ 4/20/98