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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000055204 (7)

WATSON CONSULTING GROUP INC

YYAISOI	Y CONSULTING GROOF INC	<u></u>			
Principal Place of Business Mailing Address					T HOLISOBE USE IBINE DIVILORANIE BONE DE UN DE UN DE UN BUILO BUILO HEUS DOUNT ELDI ABON
2121B CORPORATE SOUARE BLVD. SUITE 235 2121B CORPORATE SOU JACKSONVILLE FL 32216 JACKSONVILLE FL 32216			SUITE 235		
					3. Date Incorporated or Qualified 3a. Date of Last Report 06/27/1996
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			59-3389632 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	——————————————————————————————————————		5 Certificate of Status Desired 58.75 Additional
22		27			Fee Required
City & Stati	ů.	City & State			Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution
Zφ	Country	Zip	Count	ry	This corporation has liability for intangible tax under s. 199.032, Florida Statutes
24	25 9, Name and Address of Current	29	30		Florida Statutes Yes No 10. Name and Address of New Registered Agent
		ir uaftierera vifaiir	8	1 Name	10. Hanne and Advises of New Augisteres Agent
	rson, Max R		"	INDING	
2121B CORPORATE SQUARE BLVD., SUITE 235			8	2 Street Add	dress (P.O. Box Number is Not Acceptable)
JAC	KSONVILLE FL 32216		-		
			8	3	
			a	4 City	B5 Zip Code
					FL I Posso
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.					
agent La	m familiar with, and accept the obliga	ations of, Section 607.0505	, Florida Statut	es.	and to bodie of an occord i had by according to appoint the region oc
SIGNATURE.					
	Signaturi, typed or printed name of registered ager	····		gent signature requ	uked when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
THLE	President/Dire	ector DELETE		Ę.	Change Addition
NAME	Max R. Watson		1.2 NAM		
STREET ADDRESS	2121B Corporat			ET ADDRESS	
CITY-ST-ZIF	Jacksonville,	Florida 32	216 14 CITY		
TITLE	Vice President	:/Directer	2.1 T(TL)		Change Addition
NAME	Lanny P. Watso	n	2.2 NAM	E	
STREET ADDRESS	2121B Corporat	e Square Bl	vd 23 STRE	ET ADORESS	
CITY-S1-2IP	Jacksonville,	Florida 32	216 2.4 CIT	-ST-ZIP	
TITLE	Secretary-Trea	T bricte	3.1 TITE		Change Addition
NAME .	Donna L. Thomp		3.2 NAM	E	
STREET ADDRESS	2121B Corporat		vā 33 STRE	ET ADDRESS	İ
C(TY+S1+ZIP	Jacksonville,	Florida 32	216 34.01	-ST-ZIP	
TITLE		DECETE	4.1 Tet L		Change Addition
NAMÉ			4. 2 NAM	SE .	
STREET ADORESS			4.3 STR	ET ADDRESS	
CITY \$1-7P			4.4 CITY	-ST-ZIP	
TITLE		DELETE	5 1 TITL		Change Addition
NAME			52 NAM	E	
STHEET ADDRESS			5.3 STA)	ET ADDRESS	
CITY - ST - ZIP			5.4 CITY	-ST-ZIP	
MILE		DELETE			Change Addition
NAME			6.2 NAM	€ Ì	'
STREET ADURESS				ET ADDRESS	
			1		

14. I do 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 frue 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 attrichment with an address.

SIGNATURE:

MAX ROWATES UNTIL TELL UP TELL SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 257 1997

904 724-1828

Daytime Phone #

FILED

May 01 1997 8:00am

Secretary of State