

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

FILED

May 14 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 # P97000076169 (6)
 1. Corporation Name
ARMSDALE ROAD DEVELOPMENT, INC.



Principal Place of Business 4540 SOUTHSIDE BLVD., SUITE 302 JACKSONVILLE FL 32216	Mailing Address 4540 SOUTHSIDE BLVD., SUITE 302 JACKSONVILLE FL 32216
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 9551 BAYMEADOWS RD Suite, Apt. #, etc. 22 SUITE 4 City & State 23 JACKSONVILLE FL Zip 24 32256		2a. Mailing Address 26 9551 BAYMEADOWS RD Suite, Apt. #, etc. 27 SUITE 4 City & State 28 JACKSONVILLE FL Zip 29 32256		3. Date Incorporated or Qualified 09/02/1997	
		4. FEI Number 59-3469571		Applied For <input type="checkbox"/> Not Applicable	
		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 HUST, CHRISTOPHER J 4540 SOUTHSIDE BLVD., SUITE 302 JACKSONVILLE FL 32216				10. Name and Address of New Registered Agent			
				81 Name STOKES, E. CHESTER, JR.			
				82 Street Address (P.O. Box Number is Not Acceptable) 9551 BAYMEADOWS RD, SUITE 4			
				83			
				84 City JACKSONVILLE			
				85 Zip Code FL 32256			

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 *[Signature]* **E. CHESTER STOKES, JR.** **4/15/98**
Signature, typed or printed name of registered agent and true if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input checked="" type="checkbox"/> DELETE	1.1 TITLE DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME HURST, CHRISTOPHER J		1.2 NAME STOKES, E. CHESTER, JR.	
STREET ADDRESS 4540 SOUTHSIDE BLVD., SUITE 302		1.3 STREET ADDRESS 9551 BAYMEADOWS RD #4	
CITY-ST-ZIP JACKSONVILLE FL 32216		1.4 CITY-ST-ZIP JACKSONVILLE FL 32256	
TITLE <input type="checkbox"/> DELETE		2.1 TITLE DV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME PUTNAL, JAMES E.	
STREET ADDRESS		2.3 STREET ADDRESS 9551 BAYMEADOWS RD #4	
CITY-ST-ZIP		2.4 CITY-ST-ZIP JACKSONVILLE FL 32256	
TITLE <input type="checkbox"/> DELETE		3.1 TITLE V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME BRAREN, MICHAEL E.	
STREET ADDRESS		3.3 STREET ADDRESS 9551 BAYMEADOWS RD #4	
CITY-ST-ZIP		3.4 CITY-ST-ZIP JACKSONVILLE FL 32256	
TITLE <input type="checkbox"/> DELETE		4.1 TITLE V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME WALLACE, L. DENISE	
STREET ADDRESS		4.3 STREET ADDRESS 9551 BAYMEADOWS RD #4	
CITY-ST-ZIP		4.4 CITY-ST-ZIP JACKSONVILLE FL 32256	
TITLE <input type="checkbox"/> DELETE		5.1 TITLE VT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME FREDENHAGEN, SHARON W.	
STREET ADDRESS		5.3 STREET ADDRESS 9551 BAYMEADOWS RD #4	
CITY-ST-ZIP		5.4 CITY-ST-ZIP JACKSONVILLE FL 32256	
TITLE <input type="checkbox"/> DELETE		6.1 TITLE S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME HICE, SHERRY	
STREET ADDRESS		6.3 STREET ADDRESS 9551 BAYMEADOWS RD #4	
CITY-ST-ZIP		6.4 CITY-ST-ZIP JACKSONVILLE FL 32256	

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.

CR2E034 (10/97)