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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V19877

(2)

FILED Jan 30 1998 8:00am Secretary of State

FIRST (CITIZENS FACILITIES COMP	PANY, INC.			
Principal Place of Business 2211 OKEECHOBEE ROAD FT. PIERCE FL 34950-6552 US Mailing Address 2211 OKEECHOBEE ROAD FT. PIERCE FL 34950-6552 US				DO NOT WRITE IN THIS	
				Date Incorporated or Qualified 03/09/1992	
 -	lace of Business	2a. Mailing Address		4. FEI Number 65-0327205	Applied For Not Applicable
Sulte, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Žip	Country	8. This corporation owes or has paid the c	· · · · · · · · · · · · · · · · · · ·
24	9. Name and Address of Curren	29	30	Personal Property Tax due June 30.	Yes No
DΛ	LACKWICH, ALAN S., SR.	t Registered Agent	81 Name	10. Name and Address of New Registered	Agent
277 SU	70 INDIAN RIVER BLVD. ITE 501 RO BEACH FL 32980			dress (P.O. Box Number is Not Acceptable)	
			84 City	F	85 Zip Code
SIGNATURE				orporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	of changing its registered pointment as registered
12.	Signature, typed or printed name of registered ager OFFICERS AND		E: Registered Agent signature req	Quired when reinstating) DATE. ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PO	DELETE	1.1 TITLE	Application with the control of the	☐ Change ☐ Addition
NAME	SMITH, VERNON D		1.2 NAME		
STREET ADDRESS	221 OKEECHOBEE RD.		1.3 STREET ADDRESS		•
CITY-ST-ZIP	FT. PIERCE FL	DOUTTE	1.4 CITY-ST-ZIP		Channe Addition
TITLE	GIORDANO, JOHN F	DELETE	2.1 TITLE		Change Addition
NAME Street address	2211 OKEECHOBEE ROAD FT. PIERCE FL		2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	VD VD	DELETE	2. 4 C(TY - ST - ZIP 3.1 TITLE		Change Addition
NAME	MCGRATH, LARRY		3.2 NAME		C onergo C reducer
STREET ADDRESS	2211 OKEECHOBEE RD.		3.3 STREET ADDRESS		
CITY-ST-ZIP	FT. PIERCE FL		3.4 CITY-ST-ZIP		
TITLE	STD HENLEBEN, ROBERT A	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	2211 OKEECHOBEE RD.		4. 2 NAME		
STREET ADDRESS	FT. PIERCE FL		4.3 STREET ADDRESS		
CITY-ST-ZIP	VP	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME	HAYES, RODNEY	Band occurs	5.2 NAME		
STREET ADDRESS	2211 OKEECHOBEE RD		5.3 STREET ADDRESS		
CITY-ST-ZIP	FT PIERCE FL		54 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		ļ
CITY-\$T-ZIP			64 CITY-ST-ZIP		
	419 41 4 4 4				

4. 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.

1-11-00