

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

FILED
Apr 08 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 # **V15783** (6)
1. Corporation Name
GENESIS GRAPHICS, INC.

Principal Place of Business
**RT 5 BOX 5219
TALLAHASSEE FL 32311**

Mailing Address
**P.O. BOX 1091
WOODVILLE FL 32362
US**

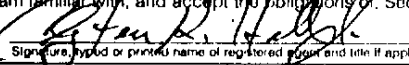


DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 GENESIS Graphics, Inc.		2a. Mailing Address 26 P.O. BOX 1091 WOODVILLE FL 32362 US		3. Date Incorporated or Qualified 02/21/1992	
Suite, Apt. #, etc. 22 1402 E. Cap Circle N.E.		Suite, Apt. #, etc. 27		4. FEI Number 59-3107108	
City & State 23 Tallahassee FL 32308		City & State 28		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24		Country 25		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Country 29		Zip 30		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent HALL, CALYTON R. JR RT 5 BOX 5219 TALLAHASSEE FL 32311				10. Name and Address of New Registered Agent	
81 Name HALL, Clayton R. Hall Jr.				82 Street Address (P.O. Box Number is Not Acceptable)	
83 3956 Camino Real				84 City Tallahassee	
85 Zip Code FL 32311				86	

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 **4-3-98**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PCS	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	PCS	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HALL, CLAYTON R JR			1.2 NAME	HALL, Clayton R Jr		
STREET ADDRESS	RT 5 BOX 5219			1.3 STREET ADDRESS	3956 Camino Real		
CITY-ST-ZIP	TALLAHASSEE FL 32311			1.4 CITY-ST-ZIP	Tallahassee FL 32311		
TITLE	VT	<input checked="" type="checkbox"/> DELETE		2.1 TITLE	VT	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HALL, TRACEY A.			2.2 NAME	HALL, Tracey A.		
STREET ADDRESS	RT 5 BOX 5219			2.3 STREET ADDRESS	3956 Camino Real		
CITY-ST-ZIP	TALLAHASSEE FL			2.4 CITY-ST-ZIP	Tallahassee FL 32311		
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 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 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:  DATE **4-3-98** **914-4032**

CR2E034 (10/97)