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 #

605097

(5)

HENRY, BUCHANAN, MICK, HUDSON & SUBER, P.A.

FILED Apr 30 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address							
117 S. GADSDEN STREET TALLAHASSEE FL 32301			P.O. DRAWER 1049 TALLAHASSEE FL 32302						
								DO NOT WRITE IN THIS SPACE	
			US						
								3. Date Incorporated or Qualified	
			T = 10 00					03/29/1974	
<u> </u>	lace of Business	2a. Mailing Address					4. FEI Number Applied For		
21			26					59-1519396 Not Applicable	
Suite, Apr. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional	
22		27					Fee Required		
City & State			City & State					6. Election Campaign Financing \$5.00 May Be	
23			Z(p Country					Trust Fund Contribution Added to Fees	
Zip	 				intry		8. This corporation owes or has paid the current year Intangible		
24	25		29		30	r		Personal Property Tax due June 30. Yes No	
		Address of Current I	Registered	Agent		B1	Name	10. Name and Address of New Registered Agent	
	ichanan, Joh					0'	Manne		
117 S. GADSDEN ST.						82	Street Address (P.O. Box Number is Not Acceptable)		
TALLAHASSEE FL 32301									
						В3			
						84	City	■■ 85 Zip Code	
]	0.1,	FL 6 25 5000	
11. Pursuant	to the provisions	of Sections 607.0502	and 607 15	08, Florida Stat	lutes, the a	bove	-named o	corporation submits this statement for the purpose of changing its registered	
office of fi	e giste red agent, i m la miliar with, ai	or both, in the State of nd accept the obligati	r Florida, Su ons of, Sec	ion charige wa tion 607.05 05 ,	s autnorize Florida Stat	a by lutes	tne corpo	oration's board of directors. I hereby accept the appointment as registered	
SIGNATURE									
SIGNATURE	Signature, typod or prin	led name of registered agent	and title if any le	able (N	O1f . Registere	d Age	nt signature r	required when reinstating) DATE	
12.		OFFICERS AND	DIRECTOR		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD			DELETE	. 1.1 Ti	TLE	1	L. Change L. Addition	
NAME		I, JOHN D JR			1.2 N	AME			
STREET ADDRESS 117 SOUTH GADSDEN STRE			1.3 \$		TREET	ADDRESS			
CITY-ST-ZIP	TALLAHASS	SEE FL			1.4 CI	TY-SI	r-ZIP		
TITLE	VDS			DELETE	21 TI	TLE		☐ Change ☐ Addition	
NAME	SUBER, JESSE F				2.2 NAME		Ì		
STREET ADDRESS	117 SOUTH	GADSDEN STREE	T	238		TREET	ADDRESS		
CITY-ST-ZIP	TALLALIACOPE EL					2 4 CITY-ST-ZIP			
TITLE				DELETE	3.1 TI	TLE		Change Addition	
NAME	WILLIAMS, HARRIET W				32 N	3.2 NAME			
STREET ADDRESS	117 S. GAD				3.3 ST	TRÉET	ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL 32301					HY-S			
TITLE	VD			DELETE	4.1 T)			Change Addition	
NAME	HUDSON, E	DWIN R			4.2 N	IAME]	į	
STREET ADDRESS		GADSDEN STREE	T				ADDRESS		
CITY-ST-ZIP	TALLAHASS		•			ITY-\$1		1	
TITLE				DELETE	5.1 TI			Change / Addition	
NAME					5.2 N			/ ///~ \	
							ADDRESS	(<i> </i> h///2n	
STREET ADDRESS								7///30	
CITY-ST-ZIP				DELETE	6.1 TI	TY-S	1-58-	Charige Addition	
TITLE				- DECEME					
NAME					6.2 N		******	300002508923 -05/04/9801022020	
STREET ADDRESS							ADDRESS	***150.00	
CITY-ST-ZIP	nostiku sinos sino :- 4-	resolion are altest the	thin filmer	tono met out-life		ITY-S		オネネーコン。UU	

nereby certify that the information supplied with this filling does not quality 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.

4/24/00