

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

FILED

Feb 19 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra S. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000091987 (5)

1. Corporation Name

CLAYTON, JOHNSTON, QUINCEY, IRELAND, FELDER, GAD
& ROUNDTREE P.A.

Principal Place of Business

111 S.E. 1ST AVENUE
GAINESVILLE FL 32601

Mailing Address

111 S.E. 1ST AVENUE
GAINESVILLE FL 32601



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/01/1995

4. FEI Number

59-3283917

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

25 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

IRELAND, LEONARD E JR.
111 S.E. 1ST AVENUE
GAINESVILLE FL 32601

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D CLAYTON, JAMES E

ROUTE 1, BOX 37

MICANOPY FL 32667

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D JOHNSTON, E. COVINGTON

6207 S.W. 35TH WAY

GAINESVILLE FL 32605

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D QUINCEY, JAMES S

1934 N.W. 32ND TERRACE

GAINESVILLE FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D IRELAND, LEONARD E JR.

11129 N.W. 12TH PLACE

GAINESVILLE FL 32606

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D FELDER, CHARLES G

4431 N.W. 15TH PLACE

GAINESVILLE FL 32605

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D GADD, CHARLES M. JR.

4401 S.W. 81ST PLACE

GAINESVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☒ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

D Robert E. Roundtree, Jr.

201 E. UNMERSTY AVE

GAINESVILLE, FL 32601

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change

☐ Addition

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:

Charles M. Gadd

2/10/98

252 376 4694

CP25034 (10/97)