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 #

123126

(5)

I. BEVERLY NALLE INC.

Principal Place of Business

Mailing Address

FILED Apr 06 1998 8:00am Secretary of State



115 E. FORSYTH STREET JACKSONVILLE FL 32202		115 E. FORSYTH STREET JACKSONVILLE FL 32202					
ALIALIANS IN ABONE		ALIANDALITHER I P. REPAR		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified 01/01/1930		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Ap	plied For	
21		26			59-0372260	<u> </u>	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75		
22		27			a. Certificate of Status Desired	Fee Re	quired
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be	
23		28	·		Trust Fund Contribution	Added 1	o Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the cu		
24	25 29 30 g Name and Address of Current Registered Agent		30		Personal Property Tax due June 30. Yes No		
DO.		it Registered Agent	Name	10. Name and Address of New Registered Agent			
ROGERS, CHARLES W. (JR.)				IVarile			
	5 E. FORSYTH STREET		82 Street Ad		dress (P.O. Box Number is Not Acceptable)		
JAI	CK SO NVILLE FL 32202		8:	 			
			84	City	Fi	85 Zip (Code
44 Pursuant	to the provisions of Sections 607.050	2 and 607 1508 Florida Statut	es the abou	/e-named.co/		-	c registered
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	Stonature, typed or printed name of registered age	ont and title if applicable (NOT	E: Registered A	gent signature reni	uired when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	\$ IN 12
TITLE	PD	☐ DFLETE	1.1 TITLE			Change	Addition
NAME	ROGERS, CHARLES W. (JR.)		1.2 NAME				
STREET ADORESS			1.3 STREE	T ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL		1,4 CITY-	ST-ZIP			
TITLE	VPD	DELETE	2.1 TITLE			Change	Addition
NAME	MALMBERG, HAROLD G.		2.2 NAME				
STREET ADDRESS	115 E. FORSYTH STREET		2.3 STREE	T ADDRESS			
CITY-ST-ZIP			2. 4 CITY-	ST - ZIP			
TITLE			3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS	115 E. FORSYTH STREET		3.3 STREE	T ADDRESS			
CITY-ST-ZIP			3.4. CITY	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAM				
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		L_] DELETE	5.1 TITLE			L Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	Dr. ere	5.4 CITY-	ST-ZIP			
TITLE	eriy T	☐ DELET e	6.1 THTLE			Change	Addition
NAME .	$\sim eV$		6.2 NAME				
STREET ADDRESS				1 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.