

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

FILED
May 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 142289 (8)
1. Corporation Name
OVERSTREET INVESTMENT COMPANY



Principal Place of Business Mailing Address
200 E ROBINSON ST SUITE 875 200 E ROBINSON ST SUITE 875
P.O. BOX 111 P.O. BOX 111
ORLANDO FL 32802 ORLANDO FL 32802
US US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	3. Date Incorporated or Qualified 10/21/1927	
22 City & State	27 City & State	4. FEI Number 59-0386870	
23 Zip	28 Zip	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 Country	29 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
26			
27			
28			
29			
30			

9. Name and Address of Current Registered Agent

PARKER, MARION J.
200 E. ROBINSON STREET
STE. 875
ORLANDO FL 32801

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 607.1508, 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	OVERSTREET, SARA L	
STREET ADDRESS	1735 BARCELONA WAY	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	COLLINS, CHARLES J. J	
STREET ADDRESS	2010 FORREST ROAD	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	WEISS, HARRY J. JR.	
STREET ADDRESS	1108 BAHAMA DRIVE	
CITY-ST-ZIP	ORLANDO FL	
TITLE	SDAT	<input type="checkbox"/> DELETE
NAME	TOLLESON, ANNE E.	
STREET ADDRESS	1090 CASTLEWAY LANE, NE	
CITY-ST-ZIP	ATLANTA GA	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	ROBIN O. SHELDON	
STREET ADDRESS	2821 SHREWSBURY ROAD	
CITY-ST-ZIP	ORLANDO FL	
TITLE	VASD	<input type="checkbox"/> DELETE
NAME	MARION J. PARKER	
STREET ADDRESS	2812 CADY WAY	
CITY-ST-ZIP	WINTER PARK FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	WALLER, E. E. III	
1.3 STREET ADDRESS	3511 Hargill Drive	
1.4 CITY-ST-ZIP	Orlando, FL 32806	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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

CR2E034 (10/97)