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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 151764

(8)

FILED
Apr 15 1998 8:00am
Secretary of State

THE CIRCLE COMPANY Principal Place of Business Mailing Address 4600 MIDDLETON PARK CIR. EAST 4600 MIDDLETON PARK CIR. EAST A419 JACKSONVILLE FL 32224 JACKSONVILLE FL 32224 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/22/1947 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-0580715 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 26 Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 61 Name GILLILAND,R H **8 SEAMARSH RD** Street Address (P.O. Box Number is Not Acceptable) 82 AMELIA ISLAND FL 32034 83 84 City 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) 12. OFFICERS AND DIRECTORS 22E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PD DELETE Change Addition TITLE 1.1 TITLE GILLILAND.R H NAME 1.2 NAME 4600 MIDDLETON PARK CIR. EAST. A419 STREET ADDRESS 1.3 STREET ADDRESS Jacksonville FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE GILLILAND.HENRIETTA L NAME 2.2 NAME 4600 MIODLETON PARK CIR. EAST, A419 STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE FL City-st-7P 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition GILLILAND, E.H. NAME 3.2 NAME 4600 MIDDLETON PARK CIR. EAST, A419 STREET ADDRESS 3.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP Change DELETE Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE ☐ Change ___ Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby 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:

R.H. Gilliland

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