FILE NOW: FILING FEE AFTER MAY 1ST 19,\$550.00

NAME

STREET ADDRESS

CITY-ST-ZIP

May 15 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** (8) WES-CORNO INVESTMENTS, INCORPORATED Mailing Address Principal Place of Business 605 W. ASHLEY STREET 605 W. ASHLEY STREET JACKSONVILLE FL 32202 JACKSONVILLE FL 32202 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/04/1956 2. Principat Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-6079885 Not Applicable 21 Suite Ant #. etc \$8.75 Additional Suite Apt #, etc 5. Cortificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing City & State \$5.00 May Be Trust Fund Contribution Added to Fees 23 Country Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent Name SMALL, N.D. 605 WEST ASHLEY ST. Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 47147 **B3** Zip Code **R4** City 85 11. Pursuant to the provisions of Sections 607 05:02 and 607 15:08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent for both, in the State of Houda. 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 607,05:05, Florida Statutes. (NOTE Registrend Agent signalure required when reinstating) lignation typical or professioner of registers diagnost and blie it applie table ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DLLETE Change 1.1 TITLE TITLE SMALL, N D 1.2 NAME NAME 605 W ASHLEY STREET 1.3 STREET ADDRESS STREET ADORESS JACKSONVILLE, FL 00000 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ___ Addition DELETE 21 HILE RICHARDSON, LEON NAME 2.2 NAME 1178 KINGS ROAD STREET ADDRESS 23 STREET ADDRESS JACKSONVILLE, FL 00000 2 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE ISZARD, JERRY JR 3.2 NAME 1179 W. 9TH STREET 3.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE RICHARDSON, F.D. III 4 2 NAME NAME 1188 W NINTH ST 4.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 4 4 CITY - ST - ZIP CITY - S1 - ZIP Change Addition DELETE 51 THLE TITLE NAME 5.2 NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY-ST-ZIP 5 4 CITY - ST - ZIP Addition Change DELFTE 6 1 T#7LE TITLE 6.2 NAME

6.3 STREET ADDRESS

64 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 trusted 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.

FILED