

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

FILED

May 01 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 # 215248 (6)

1. Corporation Name
WILLIAMS, HATFIELD & STONER, INC.



Principal Place of Business
2101 NORTH ANDREWS AVENUE
300
FT LAUDERDALE FL 33311
US

Mailing Address
2101 NORTH ANDREWS AVENUE
300
FT. LAUDERDALE FL 33311
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		09/08/1958	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-0844318	
24 Country		30 Country		Applied For	
				Not Applicable	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
ANTHONY A. NOLAN 2101 N ANDREWS AVE STE 300 FORT LAUDERDALE FL 33311				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	VD	<input type="checkbox"/> DELETE		1.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	EBERHART, JAMES F			1.2 NAME	JAMES E. PARK		
STREET ADDRESS	2101 N ANDREWS AVE, STE 300			1.3 STREET ADDRESS	2101 N. ANDREWS AVE. STE 300		
CITY-ST-ZIP	FT. LAUDERDALE FL			1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL		
TITLE	D	<input checked="" type="checkbox"/> DELETE		2.1 TITLE	TS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	HATFIELD, LEE P., JR.			2.2 NAME	DAN B. GLERUM		
STREET ADDRESS	2101 N ANDREWS AVE, STE 300			2.3 STREET ADDRESS	2101 N. ANDREWS AVE. STE 300		
CITY-ST-ZIP	FT LAUDERDALE FL			2.4 CITY-ST-ZIP	FT. LAUDERDALE, FL		
TITLE	D	<input checked="" type="checkbox"/> DELETE		3.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	STONER, E.W.			3.2 NAME	NANCY L. HURLBERT		
STREET ADDRESS	7101 N ANDREWS AVE, STE 300			3.3 STREET ADDRESS	2101 N. ANDREWS AVE. STE 300		
CITY-ST-ZIP	FT LAUDERDALE FL			3.4 CITY-ST-ZIP	FT. LAUDERDALE, FL		
TITLE	VD	<input checked="" type="checkbox"/> DELETE		4.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	SANDERS, CARROLL R			4.2 NAME	L. MICHAEL CAREY		
STREET ADDRESS	2101 N ANDREWS AVE, STE 300			4.3 STREET ADDRESS	2101 N. ANDREWS AVE. STE 300		
CITY-ST-ZIP	FORT LAUDERDALE FL			4.4 CITY-ST-ZIP	FT. LAUDERDALE, FL		
TITLE	DP	<input type="checkbox"/> DELETE		5.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	NOLAN, A. ANTHONY			5.2 NAME	STEVEN M. WATTS		
STREET ADDRESS	2101 N ANDREWS AVE, STE 300			5.3 STREET ADDRESS	2101 N. ANDREWS AVE. STE 300		
CITY-ST-ZIP	FORT LAUDERDALE FL			5.4 CITY-ST-ZIP	FT. LAUDERDALE, FL		
TITLE	V	<input checked="" type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HARVEY, ALTON L			6.2 NAME			
STREET ADDRESS	2101 N ANDREWS AVE, STE 300			6.3 STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL			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)