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

PROFIT **CORPORATION** ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT** #

(1)

DUTCHER-HIGGINBOTHAM & BASS, INC.

Feb 13 1998 8:00am Secretary of State

**FILED** 

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	The second secon						
Principal Place of Business Mailing Address							
3801 S.E. OC Stuart FL 3		3601 S.E. OCEAN BLVD	)				
SIDAMITES	74330	STUART FL 34996			DO NOT WRITE IN	N THIS SPACE	
ŀ					3. Date incorporated or Qualified	11110011102	
					04/21/1961		
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number		pplied For
21					59-0917523		lot Applicable
Suite, Apt.	W, etc.	Suite, Apt. #, etc.				¢0.75	Additional
22		27			5. Certificate of Status Desired		Required
City & State	o	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28					to Fees
Zip Country		Zip Country		8. This corporation owes or has paid the current/year Intangible			
24	[25	[29]	30		Personal Property Tax due June 30. Yes No		
	9. Name and Address of Currer	it Registered Agent		_	10. Name and Address of New Regis	stered Agent	
	itcher, stephen M.		8	Name			
1141 SW PINE TREE LANE			8:	Street Add	ress (P.O. Box Number is Not Acceptable	) .	
PA	PALM CITY FL 34990						
			8:	3			
			84	City		<b>65</b> Zip	Code
				City		FL B	COGE
office or r agent I a SIGNATURE	registered agent, or both, in the State im familiar with, and accept the obligition Significally lighter professional or registered as	of Florida, Such change was alrons of, Section 607 0505, F	authorized t lorida Statute	by the corpora	poration submits this statement for the pur tion's board of directors. I hereby accept t ired when reinstating)	the appointment as	s registered
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	PUTCHED CTECHEN M	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	DUTCHER, STEPHEN M.		1.2 NAME				
STREET ADDRESS	1141 S.W. PINE TREE LANE		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	PALM CITY FL	<del></del>	1.4 CITY-				
TITLE	AS MADELLA MEDOLL	☐ DELETE	21 TITLE			☐ Change	☐ Addition
NAME	POTTER, MARTHA K "POLL		22 NAME	ŀ			
STREET ADDRESS	1456 NE OCEAN BLVD		23 STREE	T ADDRESS			
CITY-ST-ZIP	STUART FL		2. 4 CITY	-ST-ZIP			
TITLE	AT DIFFORM LLOVE S	DELETE	3.1 TITLE	İ		Change	Addition
NAME	DUTCHER, LLOYD E	nor.	3.2 NAME	İ			
STREET ADDRESS	184 NE EDGEWATER DR #12	cus	3.3 STREE	T ADDRESS			
CITY-ST-ZIP	STUART FL		3.4. CITY	·ST-ZiP			<u></u>
TATLE		☐ DELETE	4.1 TITLE	[		☐ Change	☐ Addition
NAME			4. 2 NAMI				
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP			4.4 CiTY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY - ST - ZIP			5.4 CITY -	ST-ZIP			
TITLE		DELETE.	6.1 TITLE	T		☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY-ST-ZIP			64 CITY-	ST- 7IP			1

14. I horeby 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 suppliencental 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 chapter 607, or on an attachment with an address