

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

FILED

Mar 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 251545 (0)
1. Corporation Name
ROC-BOR INC

Principal Place of Business ROC BOR INC 400 LEVY ROAD ATLANTIC BCH FL 32233	Mailing Address P O BOX 330508 ATLANTIC BCH FL 32233 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 4730 Prince Edward Rd Suite, Apt. #, etc. 22 City & State 23 Jacksonville, FL Zip Country 24 32210 25 USA		2a. Mailing Address 26 4730 Prince Edward Rd Suite, Apt. #, etc. 27 City & State 28 Jacksonville, FL Zip Country 29 32210 30 USA		3. Date Incorporated or Qualified 09/25/1961	
4. FEI Number 59-0941074		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		7. 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			

9. Name and Address of Current Registered Agent FOWLER, L.B. 400 LEVY ROAD ATLANTIC BEACH FL 32233		10. Name and Address of New Registered Agent 81 Name L. B. Fowler 82 Street Address (P.O. Box Number is Not Acceptable) 4730 Prince Edward Road 83 84 City Jacksonville FL 85 Zip Code 32210	
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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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PO <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOWLER, R W	1.2 NAME	
STREET ADDRESS	400 LEVY RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTIC BEACH FL	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOWLER, L B	2.2 NAME	
STREET ADDRESS	400 LEVY RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTIC BEACH FL	2.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOWLER, CORALINE T	3.2 NAME	
STREET ADDRESS	400 LEVY RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTIC BEACH FL	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOWLER, CORALINE T	4.2 NAME	
STREET ADDRESS	400 LEVY RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTIC BEACH FL	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE: *L.B. Fowler* L.B. Fowler 3/14/98 904 746-4886

CR0304 (10/97)