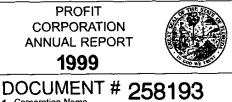
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

FOWLER-SEABOARD, INC.

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90091 040 ***150.00

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Principal Place	of Business	Mailing Address				
4730 PRINCE EU		4730 PRINCE EDW				
Jacksonville fl 32210 Us		JACKSONVILLE FL US	32210			DO NOT WRITE IN THIS SPACE
		00				3. Date Incorporated or Qualifed
						04/20/1962
2 Principal P	lace of Business	2a. Mailing Addre	ss			4. FEI Number Applied For
21		26				59-0967957 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #,	etc.			\$8.75 Additional
22		27	•			5. Certificate of Status Desired
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be
23		28	<u> </u>			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Co	untry		8. This corporation owes the current year Intangible
24	25	29	30			Personal Property Tax. Personal Property Tax. No
	9. Name and Address of Curre	ent Registered Agent		-		10. Name and Address of New Registered Agent
EOW	ICD I P			81	Name	
	LER, L.B. PRINCE EDWARD ROAD			82	Street Addr	ress (P.O. Box Number is Not Acceptable)
	(SONVILLE FL 32210			<u> </u>		
JACI	ASUNVILLE FL 322 IU			83	}	
				84	City	85 Zip Code
				_	<u> </u>	poration submits this statement for the purpose of changing its registered
SIGNATURE	m familiar with, and accept the oblig			•		ed when reinstating) DATE
12.	OFFICERS A	AND DIRECTORS	13	,		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	□ DE	LETE 1.1	TITLE	ł	Change Addit
NAME	FOWLER,R W		1.2	NAME		
STREET ADDRESS			1.3	STREET	T ADDRESS	
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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, with all other like empowered.

SIGNATURE: