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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

____1<u>998</u>

CITY-ST-ZIP

DOCUMENT #

358175

(8)

EUGENE R. SMITH & ASSOCIATES, ARCHITECTS & PLANN ERS, INC.

FILED

Apr 15 1998 8:00am

Secretary of State

CR2E034

Principal Place of Business Mailing Address 2001 W BUSCH-BLVD. 2001-W-BUSCH BLVD: -SUITE R SILITE B .. DO NOT WRITE IN THIS SPACE TAMPA FL-83612 -TAMPA-FE 30612- -3. Date Incorporated or Qualified 01/14/1970 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For ~612 Hwy. 98 East Post OFFICE Box 17848 59-1284751 Not Applicable Suite, Apt. #, etc. Sulte, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required <u>Destin, Florida</u> Tampa, Florida City & State 6. Election Campaign Financing \$5.00 May Be 32541 33682 23 Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation owes or has paid the burrent year Intangible USA <u>USA</u> Personal Property Tax due June 30. 24 25 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SMITH, EUGENE R. Eugene R. Smith
Street Address (P.O. Box Number is Not Acceptable) 2001xWLxBUSCHX8LVDx 82 SLITE 18X 612 Hwy. 98 East TAMRAK FLJ89618: X Destin 84 City 85 Zip Code 32541 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 Statules. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent a gnature required when re-instaling) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12, 13. DELETE Change Addition 1.1 TITLE TITLE SMITH, EUGENE R NAME 1.2 NAME **200 kW./BUSCHkBLND**K./**SUITE**KB: 612 Hwy 98E STREET ADDRESS 1.3 STREET ADDRESS MANRARL Destin, F1. 32541 1.4 CITY - S1-7IP CITY-ST-ZIP Addition 2.1 TITLE Change NAME **SMITH, EUGENE R** 2.2 NAME 2001kWx8U26HkBLVDxx8VIXEkBt612 Hwy 98 E STREET ADDRESS 23 STREET ADDRESS FAMPARL Destin, F1. 3254 CITY-ST-ZIP 2. 4 CHY-ST-ZIP Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITL€ TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

14. Thereby certify that the information supplied with this filling 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 suppliemental famula 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 conputation or the receiver it trustee expowered to execut this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed good an attachment with an address.

6.4 CITY - ST - 7IP

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