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

PROFIT CORPORATION ANNUAL REPORT

1997

Signature, typestical protein name of registered agent and title it approcable.

ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

FILED Jan 30 1997 8:00am Secretary of State



DOCUMENT # TWAM, HNO:

9735 BANVERSITY BLVD. W. SYSS UNIVERSITY BLVD., W. SUITE 110. P.O. BOX 4 SUITE 110. P.O. BOX 4 JACKSONVILLE FL 32201 JACKSONVILLE FL 32201-0004 3. 08/09/4970 ted or Qualified 3a()4/22/1996Report 2. Principal Place of Business 2a. Mailing Address 4. F89-1317895 Applied For 21 26 Not Applicable Suite, Apt. #, eta Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Z_{10} Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 🗌 Yes 💢 No 24 25 30 29 Florida Statutes TOMBERCINING Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name 3733 UNIVERSITY BLVD WEST JACKSONVILLE FL 32202 82 Street Address (P.O. Box Number is Not Acceptable) 63 84 City 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)

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)TOMBERLIN,M C DELETE Change HILE 1.1 TOLE 3733 UNIVERSITY BLVD W NAME 1.2 NAME CR2E034 JACKSONVILLE FL STREET ADDRESS 1.3 STREET ADDRESS CITY ST-ZIP 1 4 CITY - ST - ZIP **WOLFSON, PATRICE J.** DELETE TITLE 21 TITLE Change Addition 3733 UNIVERSITY BLVD W NAME 22 NAME JACKSONVILLE FL STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP RĚYNOLDS, MARY L DELETE 1014.6 3.1 TITLE Change Addition 3733 UNIVERSITY BLVD. W NAME 3.2 NAME

JACKSONVILLE FL STREET ADDRESS 3 3 STREET ADDRESS CHY-\$1-76 3.4. CITY - ST- ZIP DELETE Tille 4.1 TITLE Change Addition NAME 4.2 NAME STREET ACCORESIS 4.3 STREET ADDRESS CITY - ST - 7iP 4.4 CITY - ST - ZIP DELETE THE F 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5 4 CITY - ST - ZIP CITY- ST-ZF DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME

6.4 CITY - ST - ZIP 14. It do 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 armual 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.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

M.C. Tomberlin, President

1/15/97

901-731-7942

Daytime Photo 12170