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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 13 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT 1. Corporation Name 382780

(5)

MORRISHILL, INC.  Principal Place of Business Mailing Address					
					05/25/1971
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For
नी		26			<b>59-1378995</b> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional
2		27			Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
Zip Country		28 Zin	Zip Country		Trust Fund Contribution
4	25 29 30		y	B. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No	
<u> </u>	g. Name and Address of Curren	t Registered Agent	1301		10. Name and Address of New Registered Agent
RAH	IDERT, GEORGE K		81	1 Name	
535 CENTRAL AVE ST. PETERSBURG FL 33731			82	2 Street Addi	ress (P.O. Box Number is Not Acceptable)
<b>0</b> 1.	TELETIODORIGITE GOTOT		83	3	The state of the s
			84	1 City	as I Zo Code
			04	City	FL 85 Zip Code
11. Pursuant to office or re agent. I are	o the provisions of Sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obliga	Pand 607.1508, Florida State of Florida, Such change was tions of Section 607.0505, F	itos, the above authorized b lorida Statute	ve-narned corp by the corporal es.	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
SIGNATURE					
	Signature, typed or printed name of mightened ages	· · · · · · · · · · · · · · · · · · ·		gont signature requi	red when roinstating > EDATE
12.	OFFICERS AND	DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	PD Rahdert, george k	CT NELETE	1.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS	535 CENTRAL AVE		1.2 NAME	T ADDRESS	
CITY-ST-ZIP	ST PETERSBURG, FL 00000		1.4 CITY-		
TITLE	97 1 2 1 2 1 1 D D 1 1 G, 1 E 0 0 0 0 0	DELETE	2.1 TITLE	31-24	Change Addition
NAME			2.2 NAME		_ , _
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-	-ST-ZIP	
TITLE		DELETE	3.1 TITLE		Change Addition
AME			3.2 NAME		
STREET ADDRESS			3.3 STREE	T ADDRESS	
CITY-ST-ZIP			3.4 CITY-	ST-ZIP	
ITLE		☐ DĒLĒTĒ	■ j		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP	DELETE		4.4 CITY- 5.1 TITLE	ST-ZIP	Change Addition
IAME	52 NAME			☐ Clarige ☐ Addition	
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP				ĺ	
TILE		DELETE	54 CITY-ST-ZIP 61 TITLE		☐ Change ☐ Addition
IAME			6.2 NAME		- Production
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP			6.4 CITY-		
indicated of officer or d	erify that the information supplied wit on this annual report or supplemental lirector of the corporation or the roce ir Block 13 if changed proin an attac	annual report is true and ac ver or trustee impowered to	or the every	ntion stated in	Section 119.07(3)(i), Florida Statutes. I further certify that the information re shall have the same legal effect as if made under oath; that I am an uired by Chapter 607, Florida Statutes, and that my name appears in