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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 386939

(3)

EXPEDIENT SERVICES, INC.

FILED Jan 28 1998 8:00am Secretary of State

	DIENT SENVICES, INC.							
Principal Place of Business		•	Mailing Address				0.517 470	
2459 CHENEY HWY P.O.BOX 5400		2459 CHENEY HWY P.O.BOX 5400						
TITUSVILLE FL \$2783-5400		TITUSVILLE FL 32783-	TITUSVILLE FL 32783-5400		DO NOT WRITE IN THIS SPACE			
U\$		U\$ 			 Date Incorporated or Qualified 08/16/1971 			
	ipal Place of Business 2a. Mailing Address				4. FEI Number		Apr	plied For
21					56-1018404			t Applicable
22 Suite, Api	han 1.				5. Certificate of Status Desired	□ \$:		Additional
22					1.5		Fee Re	
23					6. Election Campaign Financing Trust Fund Contribution		5.00 (Added to	
Ζιρ	Country	Zip	Country	/	This corporation owes or has particular that the particular t			
24	25	29	30		Personal Property Tax due June] No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Re	gistered Ager	it	
	ughes, sherry		81	Name				
4835 SANTA ROSA AVE TITUSVILLE FL 32780			82	Street Addi	ress (P.O. Box Number is Not Acceptat	ole)		
,.			83					
			B4	City		85	Zip C	ode
44 5				İ		FLI	'	
office or	to the provisions of Sections 607.09 regi st ered agent, or both, in the Sta	502 and 607.1508, Florida Stati de of Florida. Such change was	utes, the above authorized by	e-named corp / the corporat	poration submits this statement for the place of the points board of directors. I hereby access	surpose of char at the appointm	nging its nent as r	registered 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 a	All produces in all those broads	OTF Dozielorad Arv	ant cionatura romin	ed when reinslating)	DATE		
12,		ND DIRECTORS	13.	sitt signatura regor	ADDITIONS/CHANGES TO OFFICE		ECTORS	3 IN 12
TITLE	PD						Change	Addition
NAME HUGHES, HORACE			. 1.2 NAME.					
STREET ADDRESS	4835 SANTA ROSA AVE		1.3 STREET ADDRESS					
CITY-ST-ZIP	TITUSVILLE FL		14 CITY-S	iT - ZIP				
TITLE	STD	☐ DELETE	21 TITLE				Change	Addition]
NAME	HUGHES, SHERRY		2 2 NAME					
STREET ADDRESS	4835 SANTA ROSA AVE		2.3 STREET	ADDRESS				
CITY-ST-ZIP	TITUSVILLE FL	DELETE	2. 4 CITY-5	ST - ZIP				
TITLE	HUGHES, SANDRA	☐ DELETE	3.1 TITLE				Change	Addition
NAME STREET ADDRESS	1237 EAST LMINGSTON		3.2 NAME	ADDRESS				ļ
CITY-ST-ZIP	ORLANDO FL		3.3 STREET	•				
TITLE	VPD	DELETE	3.4. CHY-S 4.1 TITLE	51 - ZIP			Change	Addition
NAME	HUGHES, CARL	<u></u> v	4.1 HILL			۰	напус	AOURION
STREET ADORESS	329 PRITCHARD ST		4.3 STREET	ADDRESS				
CITY-ST-ZIP	TITUSVILLE FL		4.4 CITY-S					
TITLE	VPD	DELETE	5.1 TITLE	-		C	hange	Addition
NAME	HUGHES, GERALD		5.2 NAME					
STREET ADDRESS	4373 LONGBOW DR.		5.3 STREET	ADDRESS				
CITY-ST-ZIP	TITUSVILLE FL		5.4 CITY - ST	T-ZIP				
TITLE		☐ DELETE	6.1 TITLE			☐ C	hange	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for t			64 CHY-ST	T-ZIP				
14, Thereby (with the information supplied	with this filing does not qualify.	ror the exempt	tion stated in \$	Section 119.07(3)(i), Florida Statutes. L	turther certify th	hat the in	nformation

4. Thereby certify that the information supplied with this tiling does not quality 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 for m an attachment with an address.

2121142112

1-10 60

11-17 - 17 71/10.