

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

FILED
May 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 405438 (3)
1. Corporation Name
J.H. OGDEN ENTERPRISES, INC.



Principal Place of Business Mailing Address
59 CUNNINGHAM DR
NEW SMYRNA BCH FL 32168
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		07/24/1972	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		NOT APPLICABLE	
24 Country		30 Country		5. Certificate of Status Desired	
				<input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year intangible	
				Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
TUMBLIN, JAMES E 59 CUNNINGHAM DR NEW SMYRNA BCH FL 32168				81 Name TUMBLIN, JOYCE E.			
				82 Street Address (P.O. Box Number is Not Acceptable) 59 CUNNINGHAM DR.			
				83 NEW SMYRNA BCH FL 32168			
				84 City FL 85 Zip Code 32168			

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 Joyce T. Tumblin, PDS *Joyce E. Tumblin* 4/23/98
Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE	1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	TUMBLIN, JAMES E		1.2 NAME	TUMBLIN, JOYCE E.			
STREET ADDRESS	59 CUNNINGHAM DR.		1.3 STREET ADDRESS	59 CUNNINGHAM DR.			
CITY-ST-ZIP	NEW SMYRNA BEACH FL		1.4 CITY-ST-ZIP	NEW SMYRNA BEACH FL 32168	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	STD	<input type="checkbox"/> DELETE	2.1 TITLE				
NAME	TUMBLIN, JOYCE E		2.2 NAME				
STREET ADDRESS	59 CUNNINGHAM DR.		2.3 STREET ADDRESS				
CITY-ST-ZIP	NEW SMYRNA BEACH FL		2.4 CITY-ST-ZIP				
TITLE	VD	<input type="checkbox"/> DELETE	3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GILLESPIE, W.M.		3.2 NAME				
STREET ADDRESS	610 N PENINSULA AVE		3.3 STREET ADDRESS				
CITY-ST-ZIP	NEW SMYRNA BEACH FL		3.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

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.

SIGNATURE *Joyce E. Tumblin* 4/23/98

CR2E034 (1097)