SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DIE ON OR BEFORE \$/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

JACKSONVILLE FL 32257-8036

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

3768 KORI ROAD

21

22

23

24

Zip



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name 438711

Country

9. Name and Address of Current Registered Agent

25

ANDERSON, WILLIAM E 3768 KORI ROAD

JACKSONVILLE FL 32217

(4)

W. E. ANDERSON CO., INC.

Mailing Address

3768 KORI ROAD

2a. Mailing Address

City & State

Ζŧρ

Suite, Apt. #, etc.

26

27

28

29

JACKSONVILLE FL 32257-6036



1757 JUL 18 111 9: 22

SECRETARY OF STATE

85

	DO NOT WRITE	IN TH	IS SPACE		
3.	Date Incorporated or Qualified	За.	Dale of Last Report		
	10/23/1973	1	12/18/1996		
4.	FEI Number		Applied For		
	59-1494129		Not Applicable		
5.	Certificate of Status Desired		\$8.75 Additional Fee Required		
6.	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
8.	This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
0.	Name and Address of New Registered Agent				

City Zip Code 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

Country

81 Name

82

83 84 Street Address (P.O. Box Number is Not Acceptable)

30

agent. I ar	n familiar with, and accept the obligations of	ida. Such change was a of, Section 607.0505, Flo	authorized by the corpora orida Statutes.	thon's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent and lift			
12.	Signature, typed or printed name or registered agent and little OFFICERS AND DIRE		Registered Agent's gnature requ	
TITLE	PD OF TOERS AND DIRE	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1	· -	i necest	1.1 TITLE	Change Addition
NAME	ANDERSON, WILLIAM E		1.2 NAME	
STREET ADDRESS	9021 KINGS COLONY RD		1.3 STREET ADDRESS	6000022471365
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-ST-ZIP	-07/24/9701113005
TITLE	SD	☐ DELETE	2.1 TITLE	6000022471365 -07/24/9701113005 ****165.00 -*****165.例***
NAME	ANDERSON, VONCILE		2.2 NAME	
STREET ADDRESS	9021 KINGS COLONY RD		2.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL		2 4 CITY-ST-ZIP	
TIFLE		☐ DELETE	3 1 TITLE	Change Addition
NAME			3 2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CiTY-ST-ZiP			3.4. C(1Y - S1 - Z(P	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		DELETE	5 1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	\n \n \n \
STREET ADDRESS			5 3 STREET ADDRESS	
CITY-ST-ZIP			5.4 C(TY-ST-7(P	
TITLE		DELETE	6.1 1\TLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY OF TID				!

14. I 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 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 chapted, or on an attachment with an address.

Our Corporation Annyal Report was sent to you on 4/28/97 with our Check #16889, copy of which is attached. We have just received a second notice and the check has not cleared our bank. We called your office and were told to use the "Second Notice to refile with another check for \$165.00 and this note explaining that the original must have been lost in the mail.

₹

W. E. Anderson Co., Inc.