

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

FILED

Apr 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 447566 (1)
 1. Corporation Name
ANDERSON'S, INC.



Principal Place of Business 6004-43RD AVENUE, WEST BRADENTON FL 34209	Mailing Address 6004-43RD AVENUE, WEST BRADENTON FL 34209
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Rt. 1, Box 2195, 189 Wexford Way Suite, Apt. #, etc. 22		Mailing Address 26 Rt. 1, Box 2195, 189 Wexford Way Suite, Apt. #, etc. 27		3. Date Incorporated or Qualified 03/12/1974
City & State 23 Lakemont, GA Zip 24 30552		City & State 28 Lakemont, GA 30552 Zip 29 30552		4. FEI Number 59-1511170 Applied For Not Applicable
Country 25 Rabun		Country 30 Rabun		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent GIROUX, H L 6108 26TH STREET WEST BRADENTON FL 34207		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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's signature required when reinstalling) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSON (RICHARD CARL)	1.2 NAME	
STREET ADDRESS	8006-17 AVENUE, W.	1.3 STREET ADDRESS	Rt. 1, Box 2195, 189 Wexford Way
CITY-ST-ZIP	BRADENTON FL	1.4 CITY-ST-ZIP	Lakemont, GA 30552
TITLE	ST <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSON (SONDRA SUE)	2.2 NAME	
STREET ADDRESS	8006-17 AVENUE, W.	2.3 STREET ADDRESS	Rt. 1 Box 2195, 189 Wexford Way
CITY-ST-ZIP	BRADENTON FL	2.4 CITY-ST-ZIP	Lakemont, GA 30552
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSON, SONDR SUE	3.2 NAME	
STREET ADDRESS	8006 17 AVE., W.	3.3 STREET ADDRESS	Rt. 1, Box 2195 189 Wexford Way
CITY-ST-ZIP	BRADENTON FL	3.4 CITY-ST-ZIP	Lakemont, GA 30552
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 **Sandra S. Anderson** 4/24/98 706/782-1576

CR2E034 (10/97)