

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 23 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 # **465309** (3)
1. Corporation Name
ROY D. MATHEWS & ASSOCIATES, INC.



Principal Place of Business 9555 TRULOCK CT SUITE 109 ORLANDO FL 32817 US	Mailing Address 9555 TRULOCK CT SUITE 109 ORLANDO FL 32817 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 9555 Trulock Ct Suite, Apt. #, etc. 22 City & State 23 Orlando, FL Zip 24 32817 Country 25 US	2a. Mailing Address 26 9555 Trulock Ct. Suite, Apt. #, etc. 27 City & State 28 Orlando, FL Zip 29 32817 Country 30 US
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3. Date Incorporated or Qualified 11/22/1974	4. FEI Number 59-1605733	Applied For <input type="checkbox"/> Not Applicable
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

**ROY MATHEWS
9555 TRULOCK CT
STE 109
ORLANDO FL 32817**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MATHEWS, ROY	1.2 NAME	
STREET ADDRESS	9555 TRULOCK CT	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	
TITLE	VSD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GENIAC, RUTH ANN	2.2 NAME	
STREET ADDRESS	9555 TRULOCK CT	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLANKMAN, LAURA	3.2 NAME	
STREET ADDRESS	9555 TRULOCK CT	3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	
TITLE		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		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		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	

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*****150.00**

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: **ROY D. Mathews, President** 7/1/98 (407)671-1717

CR2E034 (5/98)

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Roy D. Mathews & Associates, Inc.

9555 Trulock Court
Orlando, Florida 32817
office: 407/671-1717
fax: 407/673-1432
email: rdmath@msn.com

July 1, 1998

Florida Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

To Whom It May Concern:

I am enclosing this letter to ask for your assistance.

Two days ago I received the "2nd Notice" regarding the filing of our 1998 Corporation Annual Report. As a result, I immediately called the number appearing on the face of the report packet.

When I explained to your representative that I did not receive the first notice she checked the address and discovered that although it was substantially accurate, it incorrectly listed a Suite number, which may have resulted in the "1st notice" not being delivered properly. At that point the representative suggested that I return the report with a check for \$150.00 and this letter requesting a waiver of the penalty.

As you can tell, by reviewing our file, historically we have paid our annual report fees in a timely and consistent manner. Had we received the "1st Notice" the report would have been filed by its due date, as we take such notices very seriously.

We are a small business that can simply not afford a \$400.00 penalty. I am hopeful that we will not be held responsible for something that was not the result of our negligence or indifference. Thank you for your consideration.

Sincerely,



Roy D. Mathews
President