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 # 491307

(5)

FILED Jan 29 1998 8:00am Secretary of State

GEORGE PAXTON, INC.					
					1811 3 1811 3 1811 81811 81811 8
Principal Plac	e of Business	Mailing Address			
% GEORGE		% GEORGE E. PAXTON			
836 RIOMAR DR. 836 RIOMAR DR.					
VERO BEAC	H FL 32963	VERO BEACH FL 32963		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	_
2 Principal C	Place of Business	2a. Mailing Address		11/19/1975	1 1. Z
2. Friiicipai F	Tace of business	26. Mailing Address	÷	4. FEI Number	Applied For
Suite, Apt.	# etc.	Suite, Apt. #, etc.		13-1921017	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	urrent year Intangible
24	25		30	Personal Property Tax due June 30.	☐ Yes ☐ No
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Registered	d Agent
PAXTON, ESTHER S			81 Name		
836 RIOMAR DR		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	•	
VE	RO BEACH FL 32960		00		
			83		
			84 City		85 Zip Code
dd Durcunnt	to the provinions of Sections 607	0502 and 607 1509 Etaylida Statuta	the above period corn	FI	
office or r	registered agent, or both, in the S	tate of Florida. Such change was a	thorized by the corporati	oration submits this statement for the purpose ion's board of directors. I hereby accept the ap	or changing its registered pointment as registered
agent, la	im familiar with, and accept the of	bligations of, Section 607.0505, Floi	ida Statutes.		
SIGNATURE	Signature, typed or printed name of registered	d agent and life if annicable (NOTE	Registered Agent signature require	ed when reinstating) DATE	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	SD	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	LANGE, CAROLYN S		1.2 NAME		
STREET ADDRESS	836 RIOMAR DR		1.3 STREET ADDRESS		İ
CITY-ST-ZIP	VERO BCH FL		1.4 CITY - ST - ZIP		
TITLE	PD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	PAXTON, ESTHER S.		2.2 NAME		
STREET ADDRESS	836 RIOMAR DR.		2.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL		2. 4 CITY-\$T-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP		Change Addition
TITLE		L_1 DELETE	4.1 TITLE	1	☐ Change ☐ Addition
NAME OVEREY LOODERS			4. 2 NAME		
STREET AODRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		Grazigo Addition
1 WOUNT					1
CIBERT ADDRESS					İ
STREET ADORESS			5.3 STREET ADDRESS		
CITY - ST - ZIP		☐ DELETE	5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		Change Addition
CITY-ST-ZIP TITLE		DELETE	5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME		☐ DELETE	5.3 STREET ADDRESS 5.4 CITY-SY-ZIP 6.1 TITLE 6.2 NAME		☐ Change ☐ Addition
CITY - ST - ZIP TITLE		C) DELETE	5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition

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: 65THERS PAXTON (11/2) Day to 1/13/90 561-231-6290