

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

**FILED**  
**Feb 09 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 506209 (6)**

1. Corporation Name  
**MARTIN - YOUNG PRIVATE INVESTIGATIVE AGENCY, INC**

Principal Place of Business 10681 GULF BLVD #210 TREASURE ISLAND FL 33706	Mailing Address 10681 GULF BLVD #210 TREASURE ISLAND FL 33706
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>10811 70th AVE N.</b> Suite, Apt. #, etc.		2a. Mailing Address 26 <b>10811 70th AVE N.</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified 06/30/1976	
22 City & State 23 <b>SEMINOLE FL</b>		27 City & State 28 <b>SEMINOLE FL</b>		4. FEI Number 59-6589135 Applied For Not Applicable	
24 Zip 33772		29 Zip 33772		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
25 Country		30 Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
g. Name and Address of Current Registered Agent GEORGE M. HOLLAND SR. 10681 GULF BLVD, STE 210 TREASURE ISLAND FL 33706				8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent GEORGE M. HOLLAND SR. 10681 GULF BLVD, STE 210 TREASURE ISLAND FL 33706				10. Name and Address of New Registered Agent	
				81 Name <b>GEORGE M. HOLLAND, SR</b>	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83 <b>10811 70th AVE N.</b>	
				84 City <b>SEMINOLE</b> FL 85 Zip Code <b>33772</b>	

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 signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GEORGE M. HOLLAND, SR.	1.2 NAME	
STREET ADDRESS	10681 GULF BLVD., SUITE 210	1.3 STREET ADDRESS	<b>10811 70th AVE N.</b>
CITY-ST-ZIP	TREASURE ISLAND FL	1.4 CITY-ST-ZIP	<b>SEMINOLE FL 33772</b>
TITLE	STD <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YOUNG, BILLIE C.	2.2 NAME	
STREET ADDRESS	15807 REDINGTON DRIVE	2.3 STREET ADDRESS	<b>10811 70th AVE N</b>
CITY-ST-ZIP	REDINGTON BEACH FL	2.4 CITY-ST-ZIP	<b>SEMINOLE, FL 33772</b>
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		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)(f), 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 B. Mortham* **RECORDED** *APR 3/1998 813-394-2121*

CR2E034 (10/97)