

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

FILED
May 08 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 # **512883** (0)
1. Corporation Name
ROBERT WALICK ASSOCIATES, INC.



Principal Place of Business 971 E PLANT ST WINTER GARDEN FL 34787-3232	Mailing Address 971 E PLANT ST WINTER GARDEN FL 34787-3232
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date Incorporated or Qualified 09/23/1976	4. FEI Number 59-1694413 Applied For 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 type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WALICK, ROBERT H
971 E PLANT ST
WINTER GARDEN FL 32787**

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

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	S <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHAMBERS, KELLY A.	1.2 NAME	
STREET ADDRESS	314 E GENEVA ST.	1.3 STREET ADDRESS	
CITY-ST-ZIP	OCOOE FL	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALICK, ROBERT H	2.2 NAME	Director
STREET ADDRESS	1511 TANGERWOOD CT	2.3 STREET ADDRESS	Robert H. Wallick
CITY-ST-ZIP	OCOOE FL	2.4 CITY-ST-ZIP	312 E. Geneva St. Ocoee, FL 34761
TITLE	T <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALICK, JEANETTE F	3.2 NAME	
STREET ADDRESS	312 E GENEVA ST.	3.3 STREET ADDRESS	
CITY-ST-ZIP	OCOOE FL	3.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALICK, ROBERT MARK	4.2 NAME	
STREET ADDRESS	308 E GENEVA ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	OCOOE FL	4.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALICK, ROBERT KURT	5.2 NAME	Vice President
STREET ADDRESS	312 E GENEVA ST.	5.3 STREET ADDRESS	Robert Kurt Wallick
CITY-ST-ZIP	OCOOE FL	5.4 CITY-ST-ZIP	1257 Climbing Rose Dr. Orlando, FL 32818
TITLE	V <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HERZIG, KERRY L.	6.2 NAME	
STREET ADDRESS	316 E. GENEVA ST.	6.3 STREET ADDRESS	
CITY-ST-ZIP	OCOOE FL	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:

Kerry L. Herzig

Kerry L. Herzig 4/30/98 407-656-5060

CR2E034 (10/97)