

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

FILED  
Mar 13 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 # 533663 (1)  
1. Corporation Name  
JON M. HALL COMPANY

Principal Place of Business  
4027 GILDER ROSE PL  
WINTER PARK FL 32782  
US

Mailing Address  
PO BOX 1952  
WINTER PARK FL 32780  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/12/1977	
4. FEI Number 59-1748765	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	

2. Principal Place of Business 21 1140 Keyes Avenue Suite, Apt. #, etc. 22 City & State 23 Winter Park, FL Zip 24 32789 Country 25	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30
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9. Name and Address of Current Registered Agent

HALL, JON M  
4027 GILDER ROSE PLACE  
SUITE 1198  
WINTER PARK FL 32782

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 1140 Keyes Avenue
83
84 City Winter Park
85 Zip Code 32789

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: *J.M. Hall* (NOTE: Registered Agent signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
PST	HALL, JON M	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	4027 GILDER ROSE PL	1.3 STREET ADDRESS	1140 Keyes Avenue
CITY-ST-ZIP	WINTER PARK FL	1.4 CITY-ST-ZIP	Winter Park, FL 32789
TITLE	VP	2.1 TITLE	
NAME	HALL, JON M	2.2 NAME	
STREET ADDRESS	4027 GILDER ROSE PL	2.3 STREET ADDRESS	1140 Keyes Avenue
CITY-ST-ZIP	WINTER PARK FL	2.4 CITY-ST-ZIP	Winter Park, FL 32789
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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, on an attachment to this address.

SIGNATURE: *J.M. Hall*

3/2/98

CF2E034 (10/97)