


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

FILED

**Jan 29 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # 549738 (3)
1. Corporation Name
BRADLEY JOHNSON LAW FIRM, P.A.



Principal Place of Business 225 E PARK AVENUE PO BOX 1260 LAKE WALES FL 33853	Mailing Address 225 E PARK AVENUE PO BOX 1260 LAKE WALES FL 33853
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/20/1977	
21	22	26	27	4. FEI Number 59-1768463	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23	24	28	29	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	
Zip	Country	Zip	Country		

9. Name and Address of Current Registered Agent WHITE, J. NORMAN 225 E. PARK AVENUE LAKE WALES FL 33853				10. Name and Address of New Registered Agent	
				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TERRY, CLAY A	1.2 NAME	
STREET ADDRESS	225 E PARK AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WALES FL	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAMS, ROBERT L., JR.	2.2 NAME	
STREET ADDRESS	225 E PARK AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WALES FL	2.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHITE, J NORMAN	3.2 NAME	
STREET ADDRESS	225 E PARK AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WALES FL	3.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, MARK H.	4.2 NAME	
STREET ADDRESS	225 E PARK AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WALES FL	4.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAURENT, JOHN F.	5.2 NAME	
STREET ADDRESS	650 EAST DAVIDSON STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	BARTOW FL	5.4 CITY-ST-ZIP	
TITLE	STD <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUNT, ANDREW D	6.2 NAME	
STREET ADDRESS	225 E. PARK AVE.	6.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WALES 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)(l), 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: _____ DATE: 1/19/98

CR2E034 (10/97)