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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 550945

(0)

STEPHEN C. ROY & ASSOCIATES, INC.

FILED Apr 07 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address	Mailing Address				***************************************			
1425 E. NEWPORT CENTER DRIVE		1425 E. NEWPOR	1425 E. NEWPORT CENTER DRIVE							
DEERFIELD BEACH FL 33442		DEERFIELD BEAC	DEERFIELD BEACH FL 33442			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified				
						11/08/1977				
2 Principal F	Place of Business	2a Mailing Addre	2a. Mailing Address			4. FEI Number	Applied For			
21		<u> </u>	26			59-1775481		Not Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				\$8.75			
22	.,,	├ ─┐	27			5. Certificate of Status Desired	Fee Re			
City & Stat	le	City & State				6. Election Campaign Financing \$5.00 May Be				
23		28	28			Trust Fund Contribution Added to Fees				
Zip			untry		8. This corporation owes or has paid the current year Intangible					
24	25	29	30			Personal Property Tax due June 30. Yes No				
9. Name and Address of Current Registered Agent				T		10. Name and Address of New Registered Agent				
ROY, STEPHEN C				81	Name					
1425 E. NEWPORT CENTER DRIVE			82	Stront A	ddress (P.O. Box Number is Not Acceptable)					
	ERFIELD BEACH FL 33442	.,,	Sileet Adi		Silber	ddiess (1.0. box Humber is Not Acceptable)				
	LIN ICLD DENOTT E GOTTE		83							
				84	City	F	L 85 Zip (Code		
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida	Statutes, the a	above	e-named o			s registered		
office or i	registered agent, or both, in the S	tate of Florida. Such chang bligations of Section 607.0	e was authorize 505 Elorida Sta	ed by	the corp	corporation submits this statement for the purpose oration's board of directors. I hereby accept the a	ppointment as	registered		
	and accept the e	bilgations of, acotion our .o	ooo, Honoz oa		,.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered						d Agent signature required when reinstaling) DATE				
12. OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	S IN 12		
TITLE	PD	DELETE 1.1		TITLE			☐ Change	Addition		
NAME	ROY, STEPHEN C		1.2 (NAME						
STREET ADDRESS 1425 E. NEWPORT CTR DR		1.3 \$	1.3 STREET ADDRESS							
			CITY-SI	T- ZIP						
TITLE	S DELETE 21		TITLE	Ł		Change	Addition			
NAME	ROY, CHERYL		2.2 8	2.2 NAME				1		
STREET ADDRESS	A CONTRACTOR OF THE CONTRACTOR		2.3 5	STREET	ADDRESS	· · .				
CITY-ST-ZIP	ST-ZIP DEERFIELD BEACH FL		2.4	2.4 CITY-ST-ZIP						
TITLE		DEL		TITLE			Change	Addition		
NAME			3.21	NAME						
STREET ADDRESS			3.3 5	STREET	ADDRESS					

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 nor on an attachment with an address.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE 6.2 NAME

DELETE

DELETE

DELETE

11 5 20 1

QC1/10/200

Change

Change

Change

Addition

Addition

Addition