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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name 557198

(9)

JAMES F. MCCOLLUM, P.A.

## **FILED** May 08 1998 8:00am Secretary of State

Pr	incipal Plac	e of Businos	s	Mailing Addre	Malling Address				i imandi dijay dinil idadi dibya baray idil dib	(6 01011 <b>610</b> 11 01011 010	II OLAIH 1601	
	29 S. COMM EBRING FL				129 S. COMMERCE AVE. SEBRING FL 33870-3698							
								-	DO NOT WRITE IN THIS SPACE			
									3. Date Incorporated or Qualified			
9	Principal P	lace of Busin	0088	2a Mailing Ac	2a, Mailing Address				01/12/1978 4. FEI Number		pplied For	
21	, initialization	· · · · · · · · · · · · · · · · · · ·			26				59-1793172	——— <u>`</u>	ot Applicable	
-1	Suite, Apt. #, etc.				Suite, Apt. #, etc.					60 75	Additional	
22				27	27				5. Certificate of Status Desired		equired	
	City & State			City & Stat	City & State				6. Election Campaign Financing	\$5.00	May Be	
23					28				Trust Fund Contribution	Added	to Fees	
_	Zip	Country Zip			ļ	Country 30			8. This corporation owes or has paid the			
24 25 29 29 29 29 29 29 29 29 29 29 29 29 29						<u> </u>	Personat Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent				_ No	
							81 Name					
		COLLUM,		<b>-</b>								
l			OMMERCE AVENU	<b>E</b>		82	Street Addres		(P.O. Box Number is Not Acceptable)		}	
SEBRING FL 33870					83				, <u> </u>			
ŀ						84	City			FL 85 Zip	Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the							e-named	corpora	tion submits this statement for the purpo	ose of changing I	ts 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											registered	
SIGNATURE												
Signature, typed or printed name of registered agent and tice if ap					(NOTE: R		ni s <sub>g</sub> nalure	required w		ATE		
12.		00	OFFICERS A				<del>. 1</del>	Т	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR Change	Addition	
		PS MCCOLL	UM, JAMES F		DELETE	1.1 TITLE 1.2 NAME				□ Cuange	- Addition	
			OMMERCE AVE				ADDRESS	1	•			
CITY-ST-ZIP SEBRIN						1.3 STREET ADDRESS 1.4 CITY-ST-ZIP						
	OTLE V					2.1 TITLE				Change	Addition	
NAI	NAME MCCOLLUM JAMES F.		LUM JAMES F.			2.2 NAME		}			Ì	
		129 SO	SOUTH COMMERCE AVENUE			2.3 STREET ADDRESS						
CITY-ST-ZIP SEBRING FL				2.40			<u></u>					
TITL	TITLE				DELETE 3.1 TIT			[		☐ Change	☐ Addition	
NAME					3.2 NAME		l					
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NAJ						4. 2 NAME	ADDDC00					
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NAME					5.2 NAME	1						
	EET ADDRESS					5.3 STREET	ADDRESS	1				
	Y-ST-ZiP					5.4 CITY - S						
TITL					DELETE	6.1 TITLE				Change	Addition	
NAF	AE .					6.2 NAME						
STR	EET ADDRESS					6.3 STREET	ADDRESS				]	
CIT	Y-ST-ZIP					6.4 CITY - S	T- ZIP	<u>L</u>				

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.

I Ames T. R. Collum, Managing Partner