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

FILED Feb 26 1998 8:00am Secretary of State

Maling Address SZP GOLF COURSE PRIVE JACKSONVAILE FL 32211 2. Principal Place of Business 2. Malling Address 2. Ending Address 2. Ending Address 3. Date Incorporated or Qualified 07/19/1978 2. Principal Place of Business 2. Malling Address 3. Date Incorporated or Qualified 07/19/1978 2. Suite, Apt. #, etc. 2. Suite, Ap		MENT # 57985 EY, INC.	54 (1)				1,0,1,0,1,0,1,0,1,0,1,0,1,0,1,1,1,1,1,1
SYPE OLD COURSE DRIVE JACKSONVILE FL 32111 SYPE OLD COURSE DRIVE JACKSONVILE FL 32211 2. Principal Place of Business	Principal Place	e of Business	Mailing Address		· · · · · ·	1400191 91111 10010 10191 10191 01111 0101 0101	PIDH GIBII BIBIH DIGII BIDIH HOO!
2. Principal Place of Business	5279 GOLF COURSE DRIVE 5279 GOLF COURSE DRIV						
3. Date Incorporated or Quellined O7/19/1978 21						DO NOT WINITE IN THE	O PDACE
2. Principal Place of Business 2. Mailing Address 2. Mailing Addre							S SPACE
A FEINMOND Applied Flore Personal Place of Business P. Applied Flore P. Applied						·	!
Suite, Apt. 6, etc.	2. Principal P	2. Principal Place of Business 2a. Mailing Address					Applied For
Suite Apt #, etc.	26					59-1873097	Not Applicable
City & State	Suite, Apt. #, etc. Suite, Apt. #, etc.						
Zip	City & State City & State					· · · —	
28		Country		Country	,	1,000,100,000,000,000,000	
REYNOLDS, II, JOHN R 2403 ATLANTIC BLVD. JACKSONVILLE FL 32207 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Floride Statutes, the above-named corporation submits this gaterment for the purpose of changing its registered agent in femiliar with and accept the obligations of, Section 607,0502 and 607,1508, Floride Statutes, the above-named corporation submits this gaterment for the purpose of changing its registered agent in femiliar with and accept the obligations of, Section 607,0505, Ploride Statutes, the above-named corporation submits this gaterment for the purpose of changing its registered agent in femiliar with and accept the obligations of, Section 607,0505, Ploride Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 14. CITY 57-27P 17. ST-27P 17. ST-27	·			├ ── '			
2403 ATLANTIC BLVD. JACKSONVILLE FL 32207 84 City PL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation automits this gaterment for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this gaterment for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporations board of directors. I hereby accept the appointment as registered agent, and femiliar with, and accept the obligations of, Section 607 0505, Proide Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PTD DELETE 1.11THE ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 MAKE STREET ADDRESS 5279 GOLF COURSE DR. 1.3 STREET ADDRESS 5279 GOLF COURSE DR. 1.4 GIV- 51-2P TITLE STID DELETE 2.1 THE CHANGES 1.773 BLANDING BLVD. 22 MME 32 MME 33 STREET ADDRESS CITY- 51-2P TITLE DELETE 3.1 THE CHANGES 34 GIV- 51-2P TITLE DELETE 3.1 THE CHANGES 64 CITY- 51-2P TITLE DELETE 3.1 THE CHANGES 64 CITY- 51-2P TITLE DELETE 3.1 THE CHANGES 44 GIV- 51-2P TITLE				I			
### City ###	RE	EYNOLDS, II, JOHN R		B1	Name		
SIGNATURE State	2403 ATLANTIC BLVD.			B2	Street Add	ress (P.O. Box Number is Not Acceptable)	
SIGNATURE TO PTO	JACKSONVILLE FL 32207						
The prevent to the provisions of Sections 807.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, 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, 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, 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, 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, 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, agent authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. 12.				83			
The Person to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, the above-nemed corporation submits this statement for the purpose of changing its 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, 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, 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, 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, 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, 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, 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, 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, and accept the appointment as registered agent. 12.				84	City		. 85 Zip Code
SIGNATURE Signature, hyped or printed name of registered agent aired time if applicable (NOTE Registered Agent aignature required when reinstating)				<u>_</u>	<u></u>		
TITLE	SIGNATURE	Signature, typed or printed name of registered as	sgent and title if applicable (NOT	TE: Registered Ag		red when reinstating) DATE	
STREET ADDRESS CITY-S1-ZIP JACKSONVILLE FL TITLE STD DELETE JTTLE STD DELETE JTTLE STRET ADDRESS TREET ADDRESS TREET ADDRESS TACKSONVILLE FL DELETE JACKSONVILLE FL JACKSONVILLE FL JACKSONVILLE FL DELETE JACKSONVILLE FL Change Addition ADDRESS CITY-S1-ZIP TITLE JACKSONVILLE FL DELETE JACKSONVILLE FL CHANGE Addition Addition ADDRESS CITY-S1-ZIP TITLE JACKSONVILLE FL DELETE JACKSONVILLE FL CHANGE Addition Addition Addition Addition Addition ADDRESS CITY-S1-ZIP TITLE DELETE JACKSONVILLE FL CHANGE Addition Addi					····	TOOTHORN THE CONTRACTOR	
STD	NAME	REYNOLDS, GRACE M		1.2 NAME	- 1		•
TITLE REYNOLDS, II, JOHN R REYNOLDS, II, JOHN R STREET ADDRESS IT773 BLANDING BLVD. JACKSONVILLE FL DELETE 22 HAME 22 HAME 23 STREET ADDRESS CITY-ST-ZIP TITLE AAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE ACTIVE AC	STREET ADDRESS			1.3 STREET ADDRESS			
NAME REYNOLDS, II, JOHN R 22 HAME 23 STREET ADDRESS 24 CITY-ST-ZIP JACKSONVILLE FL DELETE 31 TITLE Change Addition Additi	CITY-\$1-ZIP			1.4 CITY-5	ST-ZIP		
1773 BLANDING BLVD. 23 STREET ADDRESS 1773 BLANDING BLVD. 2.4 CITY-ST-ZIP 1711LE DELETE 3.1 TITLE DELETE 3.2 NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP DELETE 4.1 TITLE DELETE 4.1 TITLE DELETE 4.2 NAME 4.2 NAME 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP 1711LE DELETE 5.1 TITLE DELETE 5.1 TITLE DELETE 5.3 STREET ADDRESS CITY-ST-ZIP DELETE DELET	TITLE		DELETE	2.1 TITLE			Change Addition
CITY-ST-ZIP	NAME			2.2 NAME			
TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP CMACHITY-ST-ZIP CMACHITY-ST-ZIP CMACHITY-ST-ZIP Addition Addi	STREET ADDRESS			2.3 STREET ADDRESS			
NAME		JACKSUNVILLE FL			ST-ZIP		
3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 3.4 CITY - ST - ZIP 3.4 CITY - ST - ZIP Change Addition A		t:	L_) DELETE				☐ Change ☐ Addition
Street Address Stre							
TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition NAME 5.2 NAME 5.2 NAME Change Addition STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP Change Addition TITLE DELETE 6.1 TITLE Change Addition					1		
A 2 NAME		<u> </u>	1 DELETE		ST-ZIP		Change Addition
A3 STREET ADDRESS A4 CITY - ST - ZIP							CI conduite CI vention
A4 CITY-ST-ZIP					ADDRESS		
TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP CTTY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition		,			1		
NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition			☐ DELETE		H - AH		Change Addition
STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition			_				
CITY-\$1-ZIP 5.4 CITY-\$1-ZIP TITLE DELETE 6.1 TITLE Change Addition					ADDRESS		
TITLE DELETE 6.1 TITLE Change Addition							
NAME 6.2 NAME			DELETE				☐ Change ☐ Addition
■ **** (NAME			6,2 NAME	ļ		
STREET ADDRESS 6.3 STREET ADDRESS	STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP 64CITY-ST-ZIP	CITY-ST-ZIP			6.4 CITY-5	T-ZIP		

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 an an attachment with an address.