

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

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Feb 03 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 601195 (1)
1. Corporation Name
EDWARD D. STONE, JR. AND ASSOCIATES, INC.

Principal Place of Business % EDWARD D. STONE, JR. 1512 EAST BROWARD BLVD., SUITE 110 FORT LAUDERDALE FL 33301	Mailing Address % EDWARD D. STONE, JR. 1512 EAST BROWARD BLVD., SUITE 110 FORT LAUDERDALE FL 33301
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country	3. Date Incorporated or Qualified 07/08/1969 4. FEI Number 59-1265229 5. Certificate of Status Desired <input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent STONE, EDWARD D. JR. 1512 EAST BROWARD SUITE 110 FORT LAUDERDALE FL 33301	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
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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 NAME STREET ADDRESS CITY-ST-ZIP TD GOLDBERG, PHILIP J. 2017 N.E. 21ST CT. FT. LAUDERDALE FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP VPD J. Robert Behling 920 S.E. 5th Court Fort Lauderdale, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP CD STONE, EDWARD D. JR. 151 STINGAREE POINT VERO BEACH FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP VPD Charles A. Bell 3797 Kinsley Place Winter Park, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP SD COOLMAN, C. DOUGLAS 1911 BAYVIEW DRIVE FT. LAUDERDALE FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP PD LALLI, JOSEPH J. 601 N. VICTORIA PARK ROAD FT. LAUDERDALE FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP VPD ARMBRUSTER, DAVID S. 1715 SE 14TH STREET FT. LAUDERDALE FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP VD MILLER, JOHN W 4363 BENEDICTINE CIRCLE ORLANDO FL	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 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, with an attachment with an address.

SIGNATURE:  FEE REQUIRED

1-8-98 954.524.3330

CR2E034 (10/97)