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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

SMITH AND SMITH, P.A.

(7)

FILED Feb 02 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address					1400 6	TON BIONI OSOS OSSS OTRIVOSOS O	IDH IDE
2801 UNIVERSITY BLVD. WEST 2801 UNIVERSITY BLV JACKSONVILLE FL 32217 JACKSONVILLE FL 32						1	
						IN THIS SPACE	
					3. Date Incorporated or Qualified		
9 Principal	Place of Business	2a. Mailing Address			04/14/1972 4. FEI Number	1 141	1 5
21 26					59-1395417	- + · · ·	ed For pplicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						¢0.75 A.J.	• •
22 27					5. Certificate of Status Desired	Fee Requi	
<u>├</u>		City & State	ê		6. Election Campaign Financing	\$5.00 ма	
23 Zin			Country		Trust Fund Contribution	Added to F	
24	Country Zip Cou		-	(This corporation owes or has pa Personal Property Tax due June	` _ `	-
24	9. Name and Address of Curre		1301		10. Name and Address of New Re		10
SMITH, STEPHEN P., JR							
2935 FOREST CIRCLE			82	Street Add	ress (P.O. Box Number is Not Acceptal	ale)	
JACKSONVILLE FL 32257			83				
			63				
			84	City		FL 85 Zip Coc	le .
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statul	tes, the abov	e-named corp	poration submits this statement for the partion's board of directors. I hereby acce	ourpose of changing its re	gistered
agent. I	am familiar with, and accept the oblig	ations of, Section 607.0505, FI	orida Statute	S.	torro board or directors. Thereby about	or the appointment as reg	Jistorou
SIGNATURE		410					
12.	Signature, typed or printed name of registered au	POT AND THE HEPPICADIE. (NOT	13.	ant aignature requi	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE DEDS AND DIRECTORS IF	NI 12
TITLE			1.1 TITLE		ADDITIONS/GHANGES TO GITTE	Change	Addition
NAME	CLATH OFFICE D. ID		1.2 NAME			,	
STREET ADDRESS	2935 FOREST CIRCLE		1.3 STREET ADDRESS				
CITY-ST-ZIP	IACUCOARMITE EI		1.4 CITY - S				
TITLE	8	☐ DELETE	21 TITLE		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME	SMITH, ALEXANDER G. 221		22 NAME	ľ			
STREET ADDRESS	9422 WOODHAVEN ROD		2.3 STREET ADDRESS				ì
CITY-ST-ZIP			2. 4 CITY-	ST - ZIP			
TITLE	1.0	VO DELETE 3.17				Change	Addition
NAME	SMITH, STEPHEN P., III		3.2 NAME				
STREET ADDRESS	1422 SAN AMARO ROAD			ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL			ST-ZIP			
TITLE		L. DELETE	4.1 TITLE			☐ Change	Addition
NAME			4.2 NAME	1			
STREET ADDRESS	i l		4.3 STREET	ADDRESS			
CITY-ST-ZIP		Driete	4.4 CITY - S	T-ZIP	100	— — — F	T
TITLE	1	☐ DELETE	5.1 TITLE			Change	Addition
NAME OTREET ADDRESS			5.2 NAME				
STREET ADDRESS			5.3 STREET	- 1			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-S 6.1 TITLE	1 - ZIP		☐ Change ☐	Addition
NAME		La occete		}		□ Onange □	, Ruollion
			6.2 NAME	ADDDECC			ŀ
STREET ADDRESS CITY-ST-ZIP			6.3 STREET				+
OH 1-31-ZIF	I		6.4 CITY - S	1 - ZIF			

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. Stephen P. Smith Jr. 1/26/98 (904) 733-2000