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

PROFIT CORPORATION ANNUAL REPORT

1998

23

24

Zip



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 631944

(6)

FLORIDA NATIONAL INVESTORS, INC.

Country

| Principal Place of Business | Mailing Address | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/06/1979 | | |
|---|---|---|--|--|
| 1216 EASTIN AVE ORLANDO FL 32804 US | 1216 EASTIN AVE ORLANDO FL 32804 US | | | |
| | | | | |
| 2. Principal Place of Business | 2a. Mailing Address 26 | 4. FEI Number 59-1969463 | | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | 6. Certificate of Status Desired F | | |
| City & State | City & State | Election Compaign Financing | | |

Country 8. This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

GUERNSEY, JOSEPH S 1216 Eastin Ave. Orlando, FL 32804

| B1 | Name | | |
|----|--|----|----------|
| 62 | Street Address (P.O. Box Number is Not Acceptable) | | |
| 83 | | _ | |
| 84 | City | 85 | Zıp Code |

Trust Fund Contribution

FILED

Feb 16 1998 8:00am

Secretary of State

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. If hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | |
|---|------------------------|---------------------|---|--|--|--|--|--|
| SIGNATURE | | | | | | | | |
| Signature: typed or profeed issue of registered agent and title of episicabile (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | | | |
| 12 | OFFICERS AND DIRECTORS | 13, | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | | | | |
| TITLE | PD DELETE | 1.1 TITLE | ☐ Change ☐ Addition | | | | | |
| NAME | GUERNSEY, JOSEPH S | 1.2 NAME | | | | | | |
| STREET ADDRESS | 1216 EASTIN AVENUE | 1.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | ORLANDO FL | 1.4 CITY - ST - ZIP | | | | | | |
| TH'LE | V DELETE | 2.1.10(1) | Change Addition | | | | | |
| NAME | FOX, JOHN M. | 2.2 NAME | • | | | | | |
| STREET ADDRESS | 2666 LAKE SHORE DR. | 23 STHEET ADDRESS | | | | | | |
| CYTY-ST-ZIP | ORLANDO FL | 2 4 CITY-ST-ZIP | | | | | | |
| TITLE | DELETE | 31 TITLE | ☐ Change ☐ Addition | | | | | |
| NAME | BRADSHAW, CHARLES E | 32 NAME | | | | | | |
| STREET ADDRESS | P O BOX 3508 | 3.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | ORLANDO FL | 3.4. CITY-ST-ZIP | | | | | | |
| TITLE | DELETE | 4.1 TITLE | ☐ Change ☐ Addition | | | | | |
| NAME | | 4. 2 NAMΓ | | | | | | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | | 4.4 CUTY - ST - ZIP | | | | | | |
| TITLE | ☐ DELETE | 5 1 TITLE | Change Addition | | | | | |
| 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 | | | | | |
| NAME | | 6.2 NAME | | | | | | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | | | | | | |
| | | | | | | | | |

does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information bort is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an accurate this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that the information

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be

Added to Fees