

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

FILED
Apr 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **647023** (1)
1. Corporation Name
PHILLIPS, GEORGE W., P.A.

Principal Place of Business 14502 N. DALE MABRY SUITE 200 TAMPA FL 33618 US	Mailing Address 14502 N. DALE MABRY SUITE 200 TAMPA FL 33618 US
---	---



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 14502 N. Dale Mabry Suite, Apt. #, etc. 22 300 City & State 23 Tampa, FL Zip 24 33618		2a. Mailing Address 26 14502 N. Dale Mabry Suite, Apt. #, etc. 27 300 City & State 28 Tampa, FL Zip 29 Hillsborough		3. Date Incorporated or Qualified 12/04/1979	
25 Hillsborough		30 Hillsborough		4. FEI Number 59-1950826	
9. Name and Address of Current Registered Agent PHILLIPS, GEORGE W 14502 N. DALE MABRY, SUITE 200 TAMPA FL 33618		10. Name and Address of New Registered Agent		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
81 Name George W. Phillips		82 Street Address (P.O. Box Number is Not Acceptable) 14502 N. Dale Mabry		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
83 Suite 300		84 City Tampa		85 Zip Code FL 33618	
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					

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	<input type="checkbox"/> DELETE	1.1 TITLE VP/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME PHILLIPS, GEORGE W.		1.2 NAME Jeffrey A. Aman	
STREET ADDRESS 3403 VALLEY RANCH DR.		1.3 STREET ADDRESS 14502 N. Dale Mabry #300	
CITY-ST-ZIP LUTZ FL		1.4 CITY-ST-ZIP Tampa, FL 33618	
TITLE ST	<input checked="" type="checkbox"/> DELETE	2.1 TITLE D. Michael Lins	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME PHILLIPS, MARY LOU		2.2 NAME 14502 N. Dale Mabry, #300	
STREET ADDRESS 3403 VALLEY RANCH DR.		2.3 STREET ADDRESS Tampa, FL 33618	
CITY-ST-ZIP LUTZ FL		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 registered or trusted 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.

SIGNATURE

George W. Phillips 4/30/98 (813) 265-2119

CR2E034 (10/97)