

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

FILED  
Mar 16 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Morthagen</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **650513** (5)

1. Corporation Name  
**CHARLES S. WHITESIDE, INC.**

Principal Place of Business <b>250 72ND DR., NORTH W PALM BCH FL 33413</b>	Mailing Address <b>250 72ND DR., NORTH W PALM BCH FL 33413</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>01/08/1980</b>	
4. FEI Number <b>59-1968075</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.		
22 City & State	27 City & State		
23 Zip	28 Country	29 Zip	30 Country

9. Name and Address of Current Registered Agent <b>PERRY, MARK A 50 SE FOURTH AVE DELRAY BCH FL 33483</b>		10. Name and Address of New Registered Agent	
		81 Name <b>Nicholas P. Wellman, Attorney</b>	
		82 Street Address (P.O. Box Number is Not Acceptable) <b>4655 S. Military Trail</b>	
		83	
		84 City <b>Lake Worth,</b>	85 Zip Code <b>FL 33463</b>

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 *Nicholas P. Wellman* 2/17/98  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	Director
NAME	WHITESIDE, CHARLES	1.2 NAME	Charles S. Whiteside
STREET ADDRESS	3124 SE US HWY 441 G5	1.3 STREET ADDRESS	4266 S. Landar Drive
CITY-ST-ZIP	OKEECHOBEE FL	1.4 CITY-ST-ZIP	Lake Worth, FL 33463-8913
TITLE	DV	2.1 TITLE	Director/President
NAME	EVERETT, JOHN M.	2.2 NAME	John M. Everett
STREET ADDRESS	580 S COUNTRY CLUB DR	2.3 STREET ADDRESS	577 S. Country Club Drive
CITY-ST-ZIP	ATLANTIS FL	2.4 CITY-ST-ZIP	Atlantis, Florida 33462
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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 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.

SIGNATURE *Nicholas P. Wellman* 2/17/98 561 471-7696

CR2E034 (10/97)