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

Apr 24 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham 🔪 Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS **19**98 DOCUMENT # (2) 653706 FLORIDA SPECIALTY ADVERTISING, INC. Principal Place of Business Mailing Address **6034 CHESTER AVE** 6034 CHESTER AVE DO NOT WRITE IN THIS SPACE JACKSONVILLE FL 32217 JACKSONVILLE FL 32217 3. Date Incorporated or Qualified 01/28/1980 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For Not Applicable 21 59-2965 103 26 Sulte, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intengible 24 25 29 30 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 <del>-RAINWATER, JULIAN --</del> CAROL J. FISHER <del>-0034 CHECTER AVE</del>-82 Street Address (P.O. Box Number is Not Acceptable) 6034 CHESTER AVE. 205 83 <del>JACK**S**ONVILLE FL 32217</del> City Zig 92217 **JACKSONVILLE** 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 famility with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNAT (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. DELETE Change Addition TITLE 1.1 TITLE <del>rainwater, Julian</del>-1.2 NAME CAROL J. FISHER **6034 CHESTER AVE. 205** 6034 CHESTER AVE. 205 STREET ADDRESS 1.3 STREET ADDRESS BACKSONVILLE FL 1.4 CITY - ST - ZIP JACKSONVILLE, FLORIDA CITY-ST-ZIP X Addition DELETE TITLE 2.1 TITLE 2.2 NAME NAME WILLIAM H. FISHER STREET ADDRESS 2.3 STREET ADDRESS 32217 CITY-ST-ZIP 2. 4 CITY-ST-ZIP Addition DELETE 3.1 TITLE TITI F NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP Addition DELETE ☐ Change TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS 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 empowared to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter), or on an attachment with an address.

**FILED** 

U- 7-98