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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 27 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 684635

(6)

CURRITUCK CORP.

SIGNATURE:

Principal Place of Business Mailing Address			***************************************				
C/O SMITH HULSEY & BUSEY 1800 FIRST UNION BANK TOWER JACKSONVILLE FL 32202 US		1800 FIRST UNION BANK JACKSONVILLE FL 32202	C/O SMITH HULSEY & BUSEY 1800 FIRST UNION BANK TOWER JACKSONVILLE FL 32202 US				
					 Date Incorporated or Qualified 08/08/1980 	/08/1980 03/19/1996	
	Place of Business	2a. Mailing Address			4. FEI Number	— —	polied For
Suite, Apt	4 2.50	26 Suite Apt # etc			59-2043771		lot Applicable
22 City & State		Suite, Apt #, etc.			5. Certificate of Status Desired	Fee R	Additional Required
23	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	City & State	T 6		Election Campaign Financing Trust Fund Contribution	☐ Added	May Be to Fees
Zip	Country	Zip	Coul	ntry	8. This corporation has liability for it		s. 199.032,
24	25 9. Name and Address of Curr	29 rent Registered Agent	30		Florida Statutes 10, Name and Address of New Reg	Yes No	
SML	TH HULSEY & BUSEY	and uchisteran when		81 Name	10, name and Address of New Neg	Jistereu Agent	
	O FIRST UNION BANK TOWER)	Į				
		i		82 Street Addr	ress (P.O. Box Number is Not Acceptab	le)	
225 WATER STREET JACKSONVILLE FL 32202			}	83			·-··
Uno	NOUNTILLE ! L GEEVE		Į				
				84 City		FL 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statu	ites, the at	pove-named corp	poration submits this statement for the p	urpose of changing	its registered
office or re	registered agent, or both, in the Sta im familiar with, and accept the obt	ate of Horida. Such change was :	authorized	d by the corporat	tion's board of directors. I hereby accep	it the appointment a	s registered
_	m talle at the cold and and pt and de-	igations of, destion dor. coop, in	itira oran	ules.			
SIGNATURE	Signature, type d or printed name of registered a	agent and title if applicable (NO)	IL Registered	1 Agent signature requir	red when reinstating)	DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		RS IN 12
TITLE	PST	DELETE	11717	ILE		Change	
NAME	PUTNAL, BRYAN L		1.2 NA	ME			
STREET ADDRESS	1800 FIRST UNION BANK TO	OWER	1.3 ST	REET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL		1.4 C ^{[1}	TY-ST-ZiP			
TITLE	VP	DELETE	2.1 TIT			Change	☐ Addition
NAME	FLETCHER, BRUCE J	/	2.2 NA	ME			
STREET ADDRESS	1800 FIRST UNION BANK TO	OWER	2.3 ST	REET ADDRESS			
CHY-ST-ZIP	JACKSONVILLE FL		2. 4 CI	ITY - \$.T - ZIP	· ·		
TITLE		☐ DELETE	3.1 TIT		***************************************	☐ Change	☐ Addition
NAME			3.2 NA	·ME			
STREET ADDRESS			3.3 ST	REET ADDRESS			
CITY-ST-ZIP			3.4. C)	ITY-ST-ZIP			
TITLE		DELETE	4.1 TiT	LE		☐ Change	Addition
NAME			4. 2 NA	AME .			
STREET ADDRESS			4.3 ST	REET ADDRESS			
CITY - ST - ZIP			4.4 CII	TY-ST-ZIP			
TITLE		DELETE	5.1 T(T	LE		Change	Addition
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 ST	REET ADDRESS			
CHTY-ST-ZIP			5.4 CII	TY-ST-21P			
TITLE		DELETE	6.1 (1)	LE		☐ Change	Addition
NAME			6.2 NA	ME			
STREET ADDRESS			6.3 ST	REET ADDRESS			
CPTY - ST - ZIP				TY-ST-ZIP			
14. I do heret	by certify that the information suppl	hed with this filing does not quali	ify for the	exemption stated	in Section 119.07(3)(i), Florida Statutes	I further certify that	t the
STREET ADDRESS OTTY-ST-ZiP 14. I do hereb	by certify that the information supply on indicated on this annual report of flicer or director of the corporation in Block 12 or Block 73 it changed,	lied with this filing does not quali ir supplemental against report is to or the receiver or trustee empoy or on apparachment with an ad-	6.3 STI 6.4 CIT	REET ADDRESS TY-ST-ZIP exemption stated	d in Section 119.07(3)(i), Florida Statutes I my signature shall have the same legal rt as required by Chapter 607, Florida St	s. I further certify tha effect as if made ur tatutes; and that my	t the nder c name