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

**PROFIT** CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 832317

HENRY W. WRIGHT & ASSOCIATES, INC.

## **FILED** Apr 28 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 714 80 FOSTER ST P O BOX 336 STE 3 DOTHAN AL 36302 DOTHAN AL 36301 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/09/1974 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 63-0596900 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 24 25 29 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BENNETT, JULIAN 81 Name 112 EAST THIRD COURT 82 Street Address (P.O. Box Number is Not Acceptable) PANAMA CITY FL 83 84 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, typied or printer/ name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10/97 12. OFFICERS AND DIRECTORS 13. DELETE ☐ Addition TITLE 1.1 TITLE Change WRIGHT, HENRY W 1.2 NAME 312 STONEGATE DRIVE 1.3 STREET ADDRESS STREET ADDRESS DOTHAN, AL 00000 CITY-ST-ZIP 14 CITY-ST-ZIP DELETE Change Addition TITL F 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Addition 3.1 TITLE Change TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CFTY-ST-7/P 4.4 CITY-ST-ZIP Addition DELETE Change TITLE 5.1 TITLE NAME 52 NAME STREET ADDRESS **5.3 STREET ADDRESS** 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE R 2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

14. Thereby 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:** 

\$10193

324-7929103