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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 839104

(7)

Mailing Address

HEWITT AND CAUSEY, INC.

FILED Apr 23 1997 8:00am Secretary of State



1611 10TH, ST. E. TUSCALOOSA AL 35404-2901		1611 10TH. ST. E. Tuscaloosa al 35404-2801							
					3. Date Incorporated or Qualified				
	Place of Business	2a. Mailing Address	ò		,	4. FEI Number			Applied For
Suite Ap	F M with	[26]				63-0723294			Not Applicab
Suite Ap	e w. etc	Suite, Apt. #, et	c.			5. Certificate of Status Desired			75 Additional e Required
City & Str		City & State		intry		Election Campaign Financing     Trust Fund Contribution			.00 May Be ded to Fees
Ζφ ]	25 29 30					This corporation has liability for intangible tax under s. 199.032, Florida Statutes     Yes No			
	9. Name and Address of Cu	rrent Registered Agent		-	r <del></del>	10. Name and Address of New Re	gistered	Agent	***************************************
WILSON, JAMES M.				81	Name	ame			
201 EAST GOVERNMENT ST. PENSACOLA FL 32501				82	Street Add	dress (P.O. Box Number is Not Acceptable)			
				83					
				84	City	· · · · · · · · · · · · · · · · · · ·	FL	85	Zip Code
1. Pursuan	It to the provisions of Sections 607.	0502 and 607.1508, Florida	Statutes, the a	pove	a-named cor	poration submits this statement for the p	urpose of	changi	ng its registere
	r registered agent, or both, in the S am familiar with, and accept the of					tion's board of directors. I hereby accep	ot the app	ointmen	it as registered
GNATURE		•							
	Signation, typed or profed name of registere			d Age	ent signature requ	lred when reinstaling)	DATE		
2.	A print to the control of the contro	AND DIRECTORS	13,		<del> </del>	ADDITIONS/CHANGES TO OFFIC	ERS AND		
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14. I do 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 of 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 addies.

SIGNATURE:

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OF

41477

Daytime Pt one #