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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Sandra B. Morth

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 856846

(1)

ROLYN (INVERNESS) INC.

,

Mailing Address

FILED Mar 06 1998 8:00am Secretary of State



Timolpai riace of business		Maning Mudiess					
808 THIRD STREET, STE C NEPTUNE BEACH FL 32286-5018			808 THIRD STREET. STE C NEPTUNE BEACH FL 32266-5018		DO NOT WRITE IN T	HIS SPACE	
					3. Date Incorporated or Qualified	7,10 0,7102	
					06/21/1983		
2. Principa	al Place of Business	2a. Mailing Address	lailing Address		4. FEI Number		pplied For
21		26			58-1392456		ot Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.	• • • • • • • • • • • • • • • • • • •			7 2	Additional
22		27			5. Certificate of Status Desired		equired
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00	May Be
23		Ţ: <u>1</u> v.r		Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip	Countr	y	8. This corporation owes or has paid the	current year In	itangible
24	25 29			Personal Property Tax due June 30. Yes No			
	9, Name and Address of C			T	10. Name and Address of New Registe	red Agent	
	CORPORATION SERVICE COI	MPANY	81	Name			
1201 HAYS STREET TALLAHASSEE FL 32301-2525			82	Street A	Address (P.O. Box Number is Not Acceptable)		
			83				
			63	'			
			84	City		85 Zip	Code
\$4 Discus	ont to the provisions of Sections 60	72.00.002 and 007.4000. Florida Chat.	100 100 000			FL BB ZIP	
office of	or registered agent, or both, in the	State of Florida Such change was	ies, the abov authorized b	e-named (corporation submits this statement for the purpo- poration's board of directors. I hereby accept the	se of changing r appointment as	its registered registered
agent.	I am familiar with, and accept the	obligations of, Section 607.0505, FI	orida Statute	S.	•		Ť
SIGNATUR	Signature, typed or printed rains of registe						
12.		IS AND DIRECTORS	13.	ent signature	required when reinsteting) DA ADDITIONS/CHANGES TO OFFICERS		00 181 40
TITLE	POS	DELETE	1.1 TITLE	Т	ADDITIONS/CHANGES TO OFFICERS	Change	Addition
NAME	ROULEAU, ROBERT		12 NAME	į		[_] Cliange	L. Addition
	IREET ADDRESS 808 3RD STREET STE C						
	APPOTENCE DEADLE		1.3 STREET ADDRESS 1.4 City-St-Zip				
CITY-ST-ZIP TITLE	V DELETE		2.1 TITLE	ST-ZIP		Change	Addition
NAME	ROULEAU, ROBERT T.					C Change	C Addition
	FEAR AN DONAL MANNE HARA		2.2 NAME 2.3 STREET ADDRESS				
STREET ADDRES	MONTREAL QUEBEC C						İ
CITY-ST-ZIP TITLE	MONTHEAL GOEDEO OF	DELETE	2. 4 CITY -	ST-ZIP		T 105	T14360
NAME		LJ DECETE	3.1 TITLE			Change	Addition
	_		3.2 NAME				ŀ
STREET ADDRES	22			T ADDRESS			
CITY-ST-ZIP	 	1 bors	3.4. CITY-	ST-ZIP			4200
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRES	³⁸			ADDRESS			
CITY - ST - ZIP		The state of the s	4.4 CITY-5	ST-ZIP			
TITLE	1	DELFTE	5.1 TITLE	ļ		Change	☐ Addition
NAME	1		5.2 NAME	1			ł
STREET ADDRES	is		5.3 STREET				l
CITY-ST-ZIP			5.4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE	ļ		Change	☐ Addition
NAME			6.2 NAME	ŀ			l
STREET ADDRES	ss		6.3 STREET	ADDRESS			ļ
CITY-ST-ZIP			6.4 CITY-5				
14. I hereb	v certify that the information suppl	ied with this filing does not qualify for	or the exemp	tion stated	d in Section 119.07(3)(i). Florida Statutes. Liurthe	r certify that the	information

4. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment with an address.

SIGNATURE:

2/11/98

R2E034 (1097