

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

0032306

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90090 044 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F22480

1. Corporation Name
TAYLOR, DAY, CURRIE & BURNETT, P.A.

Principal Place of Business 50 NORTH LAURA STREET SUITE 3500 JACKSONVILLE FL 32202 US	Mailing Address 50 NORTH LAURA STREET SUITE 3500 JACKSONVILLE FL 32202 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29	Country 25	Country 30
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3. Date Incorporated or Qualified 03/15/1981	4. FEI Number 59-2070298	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

DAY,STEPHEN E.
50 NORTH LAURA STREET, SUITE 3500
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	DAT <input type="checkbox"/> DELETE
NAME	ROEBUCK, RAYMOND L.
STREET ADDRESS	50 N LAURA STREET, SUITE 3500
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	DV <input type="checkbox"/> DELETE
NAME	TAYLOR, JOHN C., JR.
STREET ADDRESS	50 NORTH LAURA STREET, SUITE 3500
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	DP <input type="checkbox"/> DELETE
NAME	DAY, STEPHEN E.
STREET ADDRESS	50 NORTH LAURA STREET, SUITE 3500
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	DT <input type="checkbox"/> DELETE
NAME	CURRIE, BRIAN E
STREET ADDRESS	50 NORTH LAURA STREET, SUITE 3500
CITY-ST-ZIP	JACKSONVILLE, F
TITLE	DS <input type="checkbox"/> DELETE
NAME	BURNETT, MICHAEL G
STREET ADDRESS	50 NORTH LAURA ST., STE 3500
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	DAS <input type="checkbox"/> DELETE
NAME	BOYD, CHRISTOPHER P
STREET ADDRESS	50 N LAURA ST, STE 3500
CITY-ST-ZIP	JACKSONVILLE FL 32202

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 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 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, with all other like empowered.

SIGNATURE: Stephen E. Day Date: 1/18/99 (904) 354-0700 Daytime Phone #

CR2E034 (11/98)