


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

**FILED**  
**Apr 14, 1999 8:00 am**  
**Secretary of State**

04-14-1999 90147 011 \*\*\*158.75

PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # F57942**  
 1. Corporation Name  
**OPUS SOUTH CORPORATION**

Principal Place of Business <b>5401 CORPORATE WOODS. STE 100                  PENSACOLA FL 32504</b>	Mailing Address <b>5401 CORPORATE WOODS. STE 100                  PENSACOLA FL 32504</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 4200 W. CYPRESS STREET		26 4200 W. CYPRESS STREET		12/08/1981	
- Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 SUITE 444		27 SUITE 444		58-1454928	
City & State		City & State		Applied For	
23 TAMPA, FL		28 TAMPA, FL		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 33607		29 33607		<input type="checkbox"/> \$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25 USA		30 USA		<input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent		8. This corporation owes the current year Intangible Personal Property Tax.			
CORPORATION SERVICE COMPANY		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
1201 HAYS STREET		10. Name and Address of New Registered Agent			
TALLAHASSEE FL 32301		81 Name			
		82 Street Address (P.O. Box Number is Not Acceptable)			
		83			
		84 City			
		FL			
		85 Zip Code			

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VTS <input type="checkbox"/> DELETE	1.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GREENFIELD, BARRY W.	1.2 NAME	SHAW, JERRY
STREET ADDRESS	4200 W. CYPRESS ST. #444	1.3 STREET ADDRESS	4200 W. CYPRESS ST. #444
CITY-ST-ZIP	TAMPA FL	1.4 CITY-ST-ZIP	TAMPA, FL 33607
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RAUENHORST, NEIL J.	2.2 NAME	LAWSON, LAMAR
STREET ADDRESS	4200 W. CYPRESS ST. #444	2.3 STREET ADDRESS	12225 GREENVILLE AVE. #900
CITY-ST-ZIP	TAMPA FL	2.4 CITY-ST-ZIP	DALLAS, TX 75243-9362
TITLE	V <input checked="" type="checkbox"/> DELETE	3.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LEE, JAMES J	3.2 NAME	ZOROMSKY, HOWARD
STREET ADDRESS	4200 W. CYPRESS ST. #444	3.3 STREET ADDRESS	4200 W. CYPRESS ST. #444
CITY-ST-ZIP	TAMPA FL	3.4 CITY-ST-ZIP	TAMPA, FL 33607
TITLE	AS <input type="checkbox"/> DELETE	4.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KASER, MARY	4.2 NAME	BEDNAROWSKI, KETH P.
STREET ADDRESS	5401 CORPORATE WOODS 100	4.3 STREET ADDRESS	10350 EREN ROAD WEST
CITY-ST-ZIP	PENSACOLA, FL 00000	4.4 CITY-ST-ZIP	MINNETONKA, MN 55343
TITLE	V <input checked="" type="checkbox"/> DELETE	5.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KLINE, JAMES F.	5.2 NAME	PERKINS, ROBERT C.
STREET ADDRESS	9229 LBJ FREEWAY #148	5.3 STREET ADDRESS	6909 DAKOTA TRAIL
CITY-ST-ZIP	TAMPA FL	5.4 CITY-ST-ZIP	EDINA, MN 55439
TITLE	V <input type="checkbox"/> DELETE	6.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DUSEK, JOSEPH D.	6.2 NAME	GOLDMAN, AMY
STREET ADDRESS	5401 CORPORATE WOODS 100	6.3 STREET ADDRESS	4702 YUMA ST., NW
CITY-ST-ZIP	PENSACOLA FL	6.4 CITY-ST-ZIP	WASHINGTON, D.C. 20016

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: *Barry W. Greenfield* 3/15/99 (813) 877-4444  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)