## 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 #** F64036 (9)

**FILED** Apr 02 1998 8:00am Secretary of State

Suite, Apt. #, etc.  Suite, Ap	Principal Plac 5138 S.E. MI STUART FL S	FINANCIAL CORPORATION De of Business LES GRANT TERR.	Mailing Address 5138 S.E. MILES GRANT 1 STUART FL 34997	TERR.	DO NOT WRITE IN THE  3, Date Incorporated or Qualified  01/15/1982  4. FEI Number	
Suite, Apt. #, etc.   Suito, Apt. #, etc.   277   Suito, Apt. #, etc.   278   Suito, Apt. #, etc.   279   Country   279   Country   288   Zip   Zi		acc c. Basiness	i i			
City & State   City & City & State   City & State   City & City & State   City & City & State   City & Ci		#, etc.				
28   Trust Fund Contribution   Added to Fees Zip Country   7(p   Country   8, This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.   Yes   No    9. Name and Address of Current Registered Agent   10, Name and Address of New Registered Agent   10, Name   10, Name and Address of New Registered Agent   10, Name   10, Name	22		27		5. Certificate of Status Desired	Fee Required
Zip Country 7ip Country 8, This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.			City & State			
28		T				
9. Name and Address of Current Registered Agent  ARTHUR G GROUARD 5138 SE MILES GRANT TER STUART FL 99494  11. Pursuant to the provisions of Sections 607 05/02 and 607 15/08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of Section 607 05/05, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607 05/05, Florida Statutes.  SIGNATURE  Signature, byand or printed name of registered agent and tike diagnosticate of the foliation of the purpose of changing its registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607 05/05, Florida Statutes.  SIGNATURE  Signature, byand or printed name of registered agent and tike diagnosticate of the	_ `	<b>├</b> ──	<u></u>			
ARTHUR G GIROUARD 5138 SE MILES GRANT TER STUART FL 99494  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 lits registered agent 1 am familiar with, and accept the obligations of. Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typind or printed name of registered agent agent agent of the corporation submits this statement for the purpose of changing lits registered agent 1 am familiar with, and accept the obligations of. Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typind or printed name of registered agent and take 1 at paccase.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  DST GIROUARD, M CLAIRE  12 MAME  STREET ADDRESS  STUART FL  DELETE  13 SIRRET ADDRESS  STUART FL  PO GIROUARD, ARTHUR  22 NAME  STREET ADDRESS  STUART FL  DELETE  23 SIRRET ADDRESS  STUART FL  DELETE  33 SIRRET ADDRESS  STUART FL  DELETE  31 TITLE  DELETE  31 TITLE  DELETE  31 TITLE  TITLE  DELETE  31 SIRRET ADDRESS  STUART FL  DELETE  32 MAME  33 SIRRET ADDRESS  STUART FL  DELETE  31 SIRRET ADDRESS  STUART FL  DELETE  33 SIRRET ADDRESS  STUART FL  DELETE  34 City - ST - 2P  Change  Addition  Addition  Change  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  Change  Addition  Change  Addition  ADDRESS  STUART FL  Change  Addition  Change  Addition  Change  Addition  Change  Addition  Change  Addition  Change  Change  Addition  Change  Addition  Change  C	24			30		
STUART FL 99494  11. Pursuant to the provisions of Sections 607 05:02 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent 1 am familiar to a modification of both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent 1 am familiar to a both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and for the purpose of changing its registered agent and for the purpose of changing its registered agent and for the purpose of changing its registered agent signature required when relicating)  12. OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. OFFICERS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. TITLE  17. STATE	AF			81 Name	In And Line(coo at their tightstelle	
STUART FL 89484  11. Pursuant to the provisions of Sections 607 05:02 and 607 15:08. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 annihilar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  OFFICERS AND DIRECTORS IN 12  DELETE  11 ITILE  MAME  GROUARD, M CLARE  13 SIREET ADDRESS  STUART FL  14 CITY-ST-ZIP  TITLE  MAME  GROUARD, ARTHUR  5138 SE MILES GRANT TER  5138 SE MILES GRANT						
### City #FL   85   Zip Code 9 7				82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
11. Pursuant to the provisions of Sections 607 05/02 and 607 1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of. Section 607 05/05, Florida Statutes.  SIGNATURE    Signature, typand or printed name of registered agent and title if any should be appointed.   NOTE Registered Agent signature required when reinstating)   DATE				83		
11. Pursuant to the provisions of Sections 607 05/02 and 607 1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of. Section 607 05/05, Florida Statutes.  SIGNATURE    Signature, typand or printed name of registered agent and title if any should be appointed.   NOTE Registered Agent signature required when reinstating)   DATE				94 (City		RE Zin Code
SIGNATURE   Signature, typind or printed name of registered agent and tilled applicable   NOTE Registered Agent signature required when reinstating)   DATE						<b>-</b>     <b>-  -  -  -  -  -  -  -  -  -  -  -  -  -</b>
Signature. Sprad or printed name of registered agent and tale if any sheater (NOTE: Registered Agent signature required when reinstating)   DATE	11. Pursuant office or agent. I a	to the provisions of Sections 607.05:02 registered agent, or both, in the State of am familiar with, and accept the obligations.	and 607,1508, Florida Statute of Florida Such change was a lions of, Section 607,0505, Flor	s, the above-named corp uthorized by the corporat ida Statutes.	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap-	of changing its registered opointment as registered
12. OFFICERS AND DIRECTORS  TITLE  DST GIROUARD, M CLARE STREET ADDRESS STUART FL  TITLE PD GROUARD, MCLARE 1.3 STREET ADDRESS STUART FL  TITLE PD GROUARD, ARTHUR STREET ADDRESS STUART FL  DELETE 2.1 TITLE PD GROUARD, ARTHUR STREET ADDRESS STUART FL  2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP  TITLE DELETE 3.1 TITLE MAME STREET ADDRESS STUART FL  3.3 STREET ADDRESS STUART FL  3.4 CITY-ST-ZIP  TITLE MAME 3.2 NAME 3.3 STREET ADDRESS STUART FL  3.5 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Add	SIGNATURE	Stoceanie foreign or printed name of monstrand again	Lond title if enviscable (NOTE	Registered Agent signature regula	red when reinstaling) DATE	
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CITY-ST-ZIP 6.4 CITY-ST-ZIP 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						I

Indicated on this annual roport or supplied with this fining does not qualify for the exemption stated in Section 19.0 (3)(), Florida Statutes. Further certify that the information indicated on this annual roport or supplemental annual roport 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

M. CLARE

GNATURE:

School 283-6100

**SIGNATURE:**