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PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

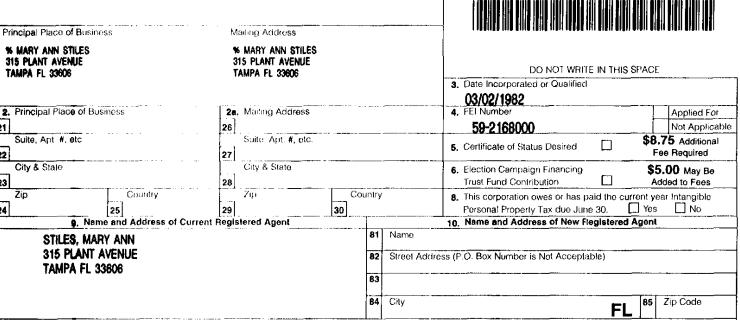
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F69273

(3)

STILES, TAYLOR, GRACE & SMITH, P.A.

FILED May 11 1998 8:00am Secretary of State



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 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (NOTE: Registered Agent signature required when reinstating) (10/97) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELC TE Change Addition PTD 1.1 TIME TITLE **STILES, MARY ANN** 1.2 NAME NAME CR2E034 315 PLANT AVENUE 13 STREET ADDRESS STREET ADDRESS TAMPA FL CITY-ST-ZIP 14 CITY-ST-ZIP Change TITLE DELETE 21 TITLE Addition NAME STILES, MARY ANN 2.2 NAM: STREET ADDRESS 315 PLANT AVENUE 2.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE ___ Addition TITLE VPD 3.1 TIBLE TAYLOR, RAYFORD H. NAME 3.2 NAME 108 E. JEFFERSON, SUITE B STREET ADDRESS 3.3 STREET ADDRESS TALLAHASSEE FL 3 4. CITY - ST - ZIP CITY - ST - ZIP Change DELETE Addition 4.1 TITLE TITLE **GRACE, ROBERT** NAME 4. 2 NAME 315 PLANT AVENUE 4.3 STREET ADDRESS STREET ADDRESS TAMPA FL 33606 CITY-ST-ZIP 4.4 CITY - ST - 7IP DELETE Addition TITLE מ 5.1 TITLE SMITH, KAREN M NAME 5.2 NAME 300002523763 111 N ORANGE AVENUE STE 850 STREET ADDRESS 5.3 STREET ADDRESS -05/14/98--01083-**-**047 ORLANDO FL 32801 CITY-ST-ZIP 5.4 CHY-S1-ZIP ***150.00 DELETE Change TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with the 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 supplience fall entural 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