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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

FILED Jan 16 1998 8:00am Secretary of State

Principal Ple 300 SOUTH	Ce of Husiness POINT BLDG HPOINT DRIVE SOUTH LLE FL 32216	` '	E SOUTH	DO NOT WRITE IN TH	
(A)				03/04/1982	
},	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt	. #, etc.	Suite. Apt. #, etc.		59-2170598	Not Applicable \$8.75 Additional
22		27		5, Certificate of Status Desired	Fee Required
City & Sta	ite	City & State		8. Election Campaign Financing	\$5.00 May Be
23	The second section of the second seco	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	Delaware Delaware
24	25 g Name and Address of Currer	29 Registered Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Register	Yes No
\$1	TEFFEY, FRED H	10 1 10 3 10 00 00 1 1 1 3 0 1 1 1 1 1 1	81 Name	TU, Name and Address of New Register	a Agein
300 SOUTH PT BLDG 6620 S PT DRSOUTH JACKSONVILLE, FL JACKSONVILLE FL 32216-6171			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	15-1 cross ros				85 Zip Code
11. Pursuant office or	t to the ptovisions of Sections 607 050 registered agent, or fioth, in the State	iz and 607.1508, Florida Statul of Florida. Such change was	es, the above-named corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the	ot changing its registered
agent la	am familiar with, and accept the obligi	ations of Section 607.0505, Fi	orida Statutės		
SIGNATURE	Signature, typed of printed name or registered age	ent and tille it applicable (NC)	F Hegistered Agent signature requi	red when reinstating) DATE	
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PST	☐ DELETE	1 t TITLE		Change Addition
NAME	STEFFEY, FRED H	_	1.2 NAMÉ		
STREET ADDRESS	6620 SOUTHPOINT DR S 300)	13 SIRFFI ADDRESS		
CITY-ST-7/P	JACKSONVILLE, FL 00000	Dr. Fre	1.4 CITY-S(-28°	——————————————————————————————————————	
TITLE NAME	STEFFEY, FRED H	L DELETE	21 HILE		Change Addition S
STREET ADDRESS	6620 SOUTHPOINT DR S 300	1	2 2 NAME		
CITY-ST-ZIP	JACKSONVILLE, FL 00000	•	2.3 STHEET AUDRESS 2.4 CITY - ST-ZIP		i
18th	\$	DELETE	3.1 TITLE		Change Addition
NAME	BROOKE, PATRICIA A	hand to make 1 %	3.2 NAME		and armine the maniful
STREET ADDRESS	6620 SOUTHPOINT DR S 300)	1.3 STRFET ADDRESS		
CRY-ST-ZIP	JACKSONVILLE FL 32216-098	39	34 CHY-SI-7P		
THE		☐ DFLETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		
STREET AUDRESS	ļ		4.4 STREET ADDRESS		
CITY - ST - ZIP			4.4 CHY-SI-ZIP	7	
TITLE		LLI DELL'IE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-51-7IP 6.1 THE		Change Addition
NAME		Outlett	6.1 111CE		Fill culturates Fill Methods
STREET AUDHESS			63 STREET ADDRESS		
- 1716 St. C. (184 Sel 14-14-14-1	j				
CITY-SI-/IP			6.4 CITY-\$1-77P		1

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 Hiock 12 or Block 13 if changed, or gazan attachment with an address