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

**PROFIT** CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

POCUMENT # F89150 (9)

## **FILED** Apr 22 1998 8:00am Secretary of State

MAGNUM INVESTMENTS OF TALLAHASSEE, INC. Principal Place of Business Mailing Address 4412 W PENSACOLA 4412 W PENSACOLA PO BOX 11237 PO BOX 11237 TALLAHASSEE FL 32302 DO NOT WRITE IN THIS SPACE TALLAHASSEE FL 32302 3. Date Incorporated or Qualified 07/01/1982 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2202706 P. O. Box 2200 21 Not Applicable Sulte, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Tallahassee, FL 23 28 Trust Fund Contribution Added to Fees Country Leon Zip Country Zip 32316-2200 8. This corporation owes or has paid the current year Intangible XX Yes 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MCKENZIE, T L 4412 W PENSACOLA Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32304 83 84 City 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 Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.3 TITLE Change Addition MCKENZIE, T L NAME 1.2 NAME 4412 W PENSACOLA STREET ADDRESS 1.3 STREET ADDRESS TALLAHASSEE, FL 00000 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition TITLE 2.1 TITLE Change MCKENZIE, LYNN NAME 22 NAME 4412 W PENSACOLA ST STREET ADDRESS 2.3 STREET ADDRESS TALLAHASSEE FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE PANEBIANCO, THOMAS F. NAME 3.2 NAME 4412 W. PENSACOLA ST. STREET ADDRESS 3.3 STREET ADDRESS TALLAHASSEE FL CITY-ST-ZIP 3.4. City - St - ZiP TITLE DELETE 4 1 TITLE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City-ST-ZIP DELETE Addition TITLE Change 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 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 must be 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.

\* Thomas F. Panebianco

4/17/98

850-575-0669