## 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

## **FILED** Apr 01 1998 8:00am Secretary of State

DOCUMENT # (0) F89296 JULIAN CONSOLIDATED, INC. Principal Place of Business Mailing Address 7491 CONROY-WINDERMERE RD. 7491 CONROY-WINDERMERE RD. ORLANDO FL 32835-2770 ORLANDO FL 32835-2770 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/29/1982 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-2204063 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 \$5.00 May Be City & State City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Žip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes ☐ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 81 Name JULIAN, DARRELL R 7491 CONROY-WINDERMERE RD 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32835 83 84 City Zip Code 85 Fi 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 1.1 TITLE TITLE JULIAN, CARL R NAME 1.2 NAME 4623 WOODLANDS VILLAGE 1.3 STREET ADDRESS STREET ADDRESS ORLANDO, FL 00000 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE JULIAN, DARRELL R 22 NAME NAME 7491 CONROY-WINDERMERE STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL 2 4 CITY-ST-2IP CITY-ST-ZIP TITLE DELETE 3.1 TITLE ☐ Change Addition NAME JULIAN, D. CARLENE 3.2 NAME 9216 COUNTRY BAY COURT STREET ADORESS 3.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 3.4. CITY - ST - ZIP ☐ DELETE Change ☐ Addition TITLE 4.1 TITLE YOUNG, MICHAEL D 4. 2 NAME NAME 9216 COUNTRY BAY COURT STREET ADDRESS 4.3 STREET ADDRESS ORLANDO FL 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 5.4 CITY - ST - ZIP CITY - ST - ZIP DELETE ☐ Change Addition 61 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP 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 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.

SIGNATURE:

CARL R. JULIAN, PRES

3/27/98

407-290-3000