## 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 #

F90134

(0)

PARKS & NILES, P.A.

Principal Plac		Mailing Address	DV0 10		
% JOHN G PARKS. JR % JOHN G PARKS. JR 2432 FLAGLER AVENUE 2432 FLAGLER AVENUE KEY WEST FL 33040 KEY WEST FL 33040			AVENUE	DO NOT WRITE IN TH	IIS SPACE
<u>;</u>				3. Date Incorporated or Qualified 07/09/1982	
2. Principal Place of Business		2a. Mailing Addr	os <b>s</b>	4. FEI Number	Applied For
21		26		59-2199689	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #,	elc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip <b>29</b>	Country 30	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible Yes No
	9. Name and Address of Co	urrent Registered Agent		10. Name and Address of New Register	ed Agent
	432 Flagler Avenue Ey west fl 33040		82 Stree 2 83	1 Address (P.O. Box Number is Not Acceptable)	85 Zip Code
			- "		·L   33040
l office or r	egistered agent, or both, in the s m familiar with, and accept the c	State of Florida. Such chan obligations of, Section 607.	ne was authorized by the co	d corporation submits this statement for the purpos rporation's board of directors. I hereby accept the	o of changing its registered appointment as registered
SIGNATURE	Signature, typed or printed name of registers	N (43) ed agent and ten if applicable	(NOTE Flegister d Agent's gnatu	to required when reinsuling	798
12.		S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS /	
TITLE	ST	☐ DE	ETE 1.1 TRILE	PD	Change Addition
NAME	NILES, JR. JACK D.		1.2 NAME		
STREET ADDRESS CITY-ST-ZIP	2432 FLAGLER AVE KEY WEST FL		. 1.3 STREET ADDRESS : 1.4 CITY - ST - ZIP		
TITLE	P	DE			Change Addition
NAME	PARKS, JOHN G J	/ \	2.2 NAME		- —
STREET ADDRESS	2432 FLAGLER AVE.		2.3 STREE1 ADDRESS		
CITY-ST-ZIP	KEY WEST FL V	□ DEI	2. 4 CITY - ST - ZIP		Change Addition
TITLE	¥	[] DE	ETE 3.1 TITLE	IVS	Change  Addition

6.4 C(IY-SI-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 frustee 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 go an attraphment with an address.

3.2 NAME

4.1 TITLE

4. 2 NAME

5 1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

3.3 STREET ADDRESS

4 3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4 4 CITY-ST-ZIP

50

SHARUN

2432 pinner AVE

3 4. CiTY-ST-ZiP

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WILLIS, GUY A

KEY WEST FL

2432 FLAGLER AVE.

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

2/21/44

Change

Change

Change

**Addition** 

Addition

Addition

**FILED** 

Apr 17 1998 8:00am

Secretary of State