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 # F92000000210 (6)

AMERICAN EXPRESS CENTURION SERVICES CORPORATION

Principal Place of Business		Mailing Address				
7777 CENTURION PARKWAY JACKSONVILLE FL 32256 US		200 VESEY ST NEW YORK NY 10285 US			DO NOT WRITE IN THIS SE	PACE
					3. Date Incorporated or Qualified 11/12/1992	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	
21		26			58-2023511	Γ
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8. F
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5 A
Zip 24	Country 25	Zip 29	30 Co	untry	8. This corporation owes or has paid the curre Personal Property Tax due June 30.	nt ye Yes
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Registered A	gent
CT	CORPORATION SYSTEM			B1 Name	е	
) South Pine Island Ro/ NTATION FL 33324)		82 Stree	t Address (P.O. Box Number is Not Acceptable)	• •
				82		

FILED May 13 1998 8:00am Secretary of State



_ Zip	Country	Zip	Count	тy	8. This corporation owes or has paid the current	nt year Inta	ingible				
4	25	29	30		Personal Property Tax due June 30.	Personal Property Tax due June 30.					
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent							
	CORPORATION SYSTEM		8	1 Name							
	XX SOUTH PINE ISLAND ROAD ANTATION FL 33324		8	2 Street Ad	Street Address (P.O. Box Number is Not Acceptable)						
	WITH TE GOOL		8	3							
			ā	4 City	FL	85 Zip C	ode				
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	' Florida. Such change wa	s authorized	by the corpor	orporation submits this statement for the purpose of ci ration's board of directors. I hereby accept the appoin	hanging its ntment as r	registered egistered				
SIGNATURE	Signature, typed or printed name of registered agent	and little if applicable (N	IOTE: Registered A	gent signature rec	quired when reinstating) DATE						
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND D	RECTOR	S IN 12				
TITLE	C	DELETE	1.1 TITLE			Change	Addition				
NAME	SKILLERN, FRANK L		1.2 NAM	E							
STREET ADDRESS	200 VESEY STREET		1.3 STRE	ET ADDRESS							
CiTY-ST-ZIP	NEW YORK NY 10285		1.4 CITY	-ST-ZIP							
TITLE	D	DELETE	2.1 TITLE			Change	Addition				
NAME	LOMBARDO, LOUIS J		2.2 NAM	E							
STREET ADDRESS	200 VESEY STREET		2.3 STRE	ET ADDRESS							
CITY-ST-ZIP	NEW YORK NY 10285		2. 4 CITY	r-ST-ZIP							
TITLE	DP	☐ DELETE	3.1 TITLE	:		Change	Addition				
NAME	BARTON, WILLIAM		3.2 NAM	£							
STREET ADDRESS	7777 CENTURION PARKWAY		3.3 STRE	ET ADDRESS							
CITY-ST-ZIP	JACKSONVILLE FL 32256		34. CITY	-ST-ZIP							
TITLE	D	☐ DELETE	4.1 TITLE			Change	Addition				
NAME	AHYE, GILBERT E		4. 2 NAM	ίE							
STREET ADDRESS	200 VESEY STREET		4.3 STRE	ET ADDRESS							
CITY-ST-ZIP	NEW YORK NY 10285		4.4 CITY	-ST-ZIP							
TITLE	8	DELETE	5.1 TITLE			Change	Addition				
NAME	NORMAN, STEPHEN P		5.2 NAM	E							
STREET ADDRESS	200 VESEY STREET		5.3 STRE	ET ADDRESS							
CITY-ST-ZIP	NEW YORK NY 10285		5.4 CITY	-ST-ZIP							
TITLE	VI	DELETE	6.1 TITLE			Change	Addition				
NAME	ROACH, LARRY T		6.2 NAMI	ž į							
STREET ADDRESS	7777 CENTURION PARKWAY		6.3 STRE	ET ADDRESS							
CITY-ST-ZIP	JACKSONVILLE FL 32256		6.4 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:

Stephen P. Norman, Secretary 4/2/198

212 640-3250

Applied For Not Applicable \$8.75 Additional

Fee Required \$5.00 May Be Added to Fees