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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000001183 (1)

WRIGHT & ASSOCIATES INC.

Principal Place of Business

Mailing Address

## **FILED** May 07 1998 8:00am Secretary of State



		677 N. WASHINGTON BL SARASOTA FL 34236	VD.			
SANAGUIA FL	L 34530	SANASOIN FL 34230		DO NOT WRITE IN THIS S	PACE	
]				3. Date Incorporated or Qualified		
				03/13/1995		
	lace of Business	2a. Mailing Address	1	4. FEI Number	Applied For	
	WHITFIELD AND.	26 5899 WH	TFICLD AV	65-0553986	Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22 207		27 204			Fee Required	
City & State		City & State	EC	6. Election Campaign Financing	\$5.00 May Be	
	950/79, FL	28 SARASOTA		Trust Fund Contribution	Added to Fees	
Zip 242	43 Country	34248	Country 30 MANA 787	8. This corporation owes or has paid the curr	ent year Intangible  Yes  No	
24 7 12	9. Name and Address of Current	Registered Agent	30 / /21/27 / [08]	Personal Property Tax due June 30.  10. Name and Address of New Registered A		
WRIGHT, MARK N 81 Name						
n and the second of the second						
SARASOTA FL 34236			82 Street	82 Street Address (P.O. Box Number is Not Acceptable) 5789 WHITFIELD AVE. STE. 204		
3AKASUTA FL 34230 83				11 WAITE OF VOIL OF		
City Sign				ARASOTA FL	85 Zip Code 3 42 4 3	
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						
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 additional acceptance of the purpose of changing its registered 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 additional properties of the purpose of changing its registered of florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered 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 a properties of the purpose of changing its registered 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 a properties of the purpose of changing its registered of florida.						
SIGNATURE .	Signature, typed or printed name of registered green	and tile if applicable (NOI	- Registered Agent signature	required when reinstating) DATE		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	PC	☐ DELETE	1.1 TITLE		Change 🔲 Addition	
NAME	WRIGHT, MARK N		1.2 NAME	1.00		
STREET ADDRESS	3908 57TH DR. E.		1.3 STREET ADDRESS	4836 TIVOLI AVB.		
CITY-ST-ZIP	BRADENTON FL 34203-5551		1.4 CITY-ST-ZIP	SARASOTA /-L 3425		
TITLE	8	DELETE	2.1 TITLE	/	Change	
NAME	WRIGHT, ERICA Y		2.2 NAME	1021 = 1011 Arts.		
STREET ADDRESS	3908 57TH DR. E.		2.3 STREET ADDRESS	9836 710001 7100		
C/TY-ST-ZIP	BRADENTON FL 34203-5551		2.4 CITY+ST-ZIP	4836 TIVOLI AUG. SARASOTA, FL 34235 4836 TIVOLI AVE. SARASOTA, FL 34235		
TITLE		DELETE	3.1 TITLE	<b>,</b>	Change Addition	
NAME			3.2 NAME			
STREET ADORESS			3.3 STREET ADDRESS	1		
CITY-ST-ZIP		DELETE	3.4. CITY - ST - 7IP		Change	
TITLE		☐ DETE JE	4.1 THLE	'	Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP		Change Addition	
TITLE		€ DETER	5.1 TITLE			
NAME			5.2 NAME	30000252477 -05/15/9801009039	<u>-</u> -	
STREET ADDRESS			5.3 STREET ADDRESS	-U5/15/38U1UU3U5 -u5/15/38U1UU3U5		
CITY-ST-ZIP		DELETE	5.4 CITY-S1- ZIP	***158,75	Change Addition	
TITLE		[ ] DETEIL	6.1 TITLE	<b>,</b>		
NAME			6.2 NAME		1/\r \r\	
STREET ADDRESS			6.3 STREET ADDRESS		1 20,1	
CITY-ST-ZIP			6.4 CITY-ST-ZIP		<u> </u>	

Thereby 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.

MALL W. JNIGHT

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