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

**CORPORATION ANNUAL REPORT** 

Feb 09 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS

DOCUM 1. Corporation AULD LA	MENT # F95000 AND SYNE, INC.	001328 (2)	)				
Principal Place of Business 584 SOUTH FLETCHER AVE. FERNANDINA BEACH FL 32034		Mailing Address 584 South Fletcher Ave. Fernandina Beach Fl 32034			* 1091/29 1110 19191 2111 00111 79111 30115 30111 40101		29: 19(( <b>:3()</b>
					DO NOT WRITE IN THIS S	PACE	
					3: Date Incorporated or Qualified 03/21/1995		
2. Principal Pla	al Place of Business 2a. Mailing Address				4. FEI Number	I A	pplied For
21		26			58-1688526		ot Applicable
Suite, Apt. #	, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional equired
City & State		City & State			6. Election Campaign Financing		May Be
23		28			Trust Fund Contribution		to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the curr		
24]	25 Same and Address of Current	29 Registered Agent	30		Personal Property Tax due June 30.  10. Name and Address of New Registered A		J No
AIR	D, RICHARD	nogratored Agent		81 Name	10, Hallie and Address of Non Hogistores A	Aein	
584 SOUTH FLETCHED AVE					(D.O. Doubleston in Not Associable)		,
FERNANDINA BEACH FL 32034			82 Street Add	ress (P.O. Box Number is Not Acceptable)			
				83			
				84 City	p= 1	<b>85</b> Zip	Code
44 Purpupat to	the provisions of factions 607 01 00	and CO7 1609 Florido Clot	iton the ob	l named one	FL	abangina i	to realstand
office or reg agent. I an	gistered light, of hell), in the Sylle of tample with any her entire gallent	or Section 607.033 in the first state of Section 607.033 in first secti	authorized Iorida Stat	by the corpora	poration submits this statement for the purpose of tion's board of directors. I hereby accept the apport		
SIGNATURE _		///4	ו אועוו	~ ] ]		2-2-	98
12.	of allie, typed of printed name of figuration agent OFFICERS AND		13.	Agent signature requ	Ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12
TITLE	- OP	DELETE	1.1 10	i.E	ADDITIONS/OFFAINGED TO OFFTOERS AND	Change	Addition
NAME	AULD, RICHARD		1.2 NA	ME			
STREET ADDRESS	5964 HWY 29		1.3 ST	REET ADDRESS			
CITY-ST-ZIP	PALMETTO GA 30268	- Divers	1.4 C/TY			Observe	4.000
TITLE	AULD, JO ELLEN	DELETE	2170			Change	Addition (
STREET ADDRESS	605 CANDLER ST. APT. C4		22 N#	ME REET ADDRESS			
CITY-ST-ZIP	GAINESVILLE GA 30501			TY-ST-ZIP			
TITLE		DELETE	31 TII			Change	Addition
NAME			3.2 NA	ME			
STREET ADDRESS			3.3 ST	REET ADDRESS			
CITY-ST-ZIP				TY-ST-ZIP		···	
TITLE		☐ DELETE	4.1 7(1	l l		Change	L. Addition
NAME PARTET ADDRESS			4.2 N	REET ADDRESS			ł
STREET ADDRESS							
CITY-ST-ZIP TITLE		DELETE	5.1 Til	Y-ST-ZIP LE		Change	Addition
NAME		<del></del>	5.2 NA	ı			
STREET ADDRESS				REET ADDRESS			}
CITY-ST-ZIP			5.4 CI	Y-ST-ZIP			
TITLE		DELETE	61 TI			Change	☐ Addition
NAME			6.2 NA	ME			
STREET ADORESS							
CITY-ST-ZIP			6.3 ST	REET ADDRESS			1

indicated on this armual report or supplemental armual upon its 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 of the receiver or tyistee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, an adapting of the receiver of the same appears in Block 12 or Block 13 if chapter 607.

**FILED**