

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

FILED

Feb 05 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000000209 (4)  
1. Corporation Name  
J.H. BOONE'S INC.

Principal Place of Business 624 A E. MATTHEWS MINT HILL RD. MATTHEWS NC 28105	Mailing Address 624 A E. MATTHEWS MINT HILL RD. MATTHEWS NC 28105
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 901-F Sam Newell Rd Suite, Apt. #, etc.		2a. Mailing Address 25 901-F Sam Newell Rd. Suite, Apt. #, etc.		3. Date Incorporated or Qualified 01/11/1996	
22 City & State 23 MATTHEWS NC Zip 24 28105		27 City & State 28 MATTHEWS NC Zip 29 28105		4. FEI Number 56-1671131 Applied For Not Applicable	
25 Country		30 Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
26 Country		31 Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
27 Country		32 Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CROSSLEY, ALAN 350 NW 39TH AVE., #B GAINESVILLE FL 32609				10. Name and Address of New Registered Agent 81 Name Charles R Boone 82 Street Address (P.O. Box Number is Not Acceptable) 350 NW 39th AVE #B 83 84 City Gainesville FL 85 Zip Code 32609			
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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 Charles R Boone (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PDC	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BOONE, JANIS H			1.2 NAME			
STREET ADDRESS	9945 PROVIDENCE FOREST LANE			1.3 STREET ADDRESS			
CITY-ST-ZIP	CHARLOTTE NC 28270			1.4 CITY-ST-ZIP			
TITLE	VDC	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BOONE, CHARLES R			2.2 NAME			
STREET ADDRESS	9945 PROVIDENCE FOREST LANE			2.3 STREET ADDRESS			
CITY-ST-ZIP	CHARLOTTE NC 28270			2.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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:

Charles R Boone FILED

1/28/98 704-847-0404

CR2E034 (10/97)