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

Secretary of State DIVISION OF CORPORATIONS DOCUMENT # F97000003495 (5) NELSON SERVICE GROUP, INC. Principal Place of Business Mailing Address 900 SO CHESTINUT ST 900 SO CHESTNUT ST FLORENCE AL 35830 FLORENCE AL 35630 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/03/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 63-0648518 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 25 30 Personal Property Tax due June 30. 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 CT CORPORATION 1200 SO PINE ISLAND RD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 7695 1084 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. CDP TITLE DELETE 1.1 TITLE Change Addition **NELSON, ALEX** NAME 1.2 NAME 900 SO CHESTNUT ST STREET ADDRESS 1.3 STREET ADDRESS **FLORENCE AL 35630** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition vn Change TITLE 2.1 TITLE RYAN, DAVID NAME 2.2 NAME 900 SO CHESTNUT ST STREET ADDRESS 2.3 STREET ADDRESS FLORENCE AL 35830 2.4 CITY-ST-ZIP CITY - ST - ZIP DELETE ☐ Change ☐ Addition TITLE 3.1 TITLE Robert Downie NAME 3.2 NAME 900 S Chestnut St 100 Al. 35630 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4 2 NAME MAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

I heroby 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.

64 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

R. Donie (Roser Donnie) C.E.O.

2-10-98

FILED

Feb 16 1998 8:00am