## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name F9,7000003714 (9)

## THE ENSER CORPORATION OF ALABAMA

Principal Place of Business	Mailing Address			
P.O. BOX 48548 ST. PETERSBURG FL 33743-8548	P.O. BOX 48548 St. Petersburg Fl 33743-8548	DO NOT WRITE IN THIS <b>\$</b> PACE		
		3. Date Incorporated or Qualified 07/17/1997		
Principal Place of Business	2a. Mailing Address 26	4.63-0921815		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired \$8.7		

**FILED** Sep 09 1998 8:00am Secretary of State



					011111001	
2. Principal P	lace of Business 2a. Mailing Address 26			163-0921815	Applied For Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	0	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the cu	rrent year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
<u> </u>	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered	Agent
			81 Name			
11400 BELCHER RD.			82 Street Address (P.O. Box Number is Not Acceptable)			
LARGO FL 33773			52 Street Address (P.O. Box Number is Not Acceptable)			
LAIN	DANGO FL 33/13			83		
				84 City	FL	85 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 ages	nt and tille if applicable	(NOTE: Register	red Ageni signature requ	pired when reinstating) DATE	
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	CPD	DELE	TE 1.1 TIT	LE		Change Addition
NAME	JACKSON, R. ROY		1.2 NA	ME		
STREET ADDRESS	11400 BELCHER RD.		1.3 ST	REET ADDRESS		
CITY-ST-ZIP	LARGO FL 33773		1.4 CH	Y-ST-ZIP		
TITLE	VST	DELE	TE 2.1 TIT	LE		Change Addition
NAME	WALKER, STEVEN C		2.2 NA	ME		
STREET ADDRESS	UAH JOHNSON RESEARCH CI	enter	2.3 STI	REET ADDRESS		*
CITY-S1-ZIP	HUNTSVILLE AL 35899		2.4 CIT	Y-ST-ZIP		10
TITLE	-	DELE	TF 3.1 TIT	LE		Change Addition
NAME			3.2 NA	ме		
STREET ADDRESS			3.3 \$11	REET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		DELE				Change Addition
NAME			4.2 NA			S.IBINGS E FLOORION
STREET ADDRESS				REET ADDRESS		
				Y-ST-ZIP		
CITY-ST-ZIP TITLE		DELE				Change Addition
NAME			5.2 NA			Cutailing [7] Yaquiqui
				REET ADDRESS		
STREET ADDRESS						
CITY-ST-ZIP				Y-ST-ZIP		Change Addition
TITLE		LJ DELE	11-			L Change Addition
NAME			6.2 NA			
STREET ADDRESS				REET ADDRESS		-
CITY-ST-ZIP	L		6.4 CIT	Y-ST-ZiP	1 40 07(0)(2) Ft. (2) Oct. 4 - 15 -4 12	di-1 M C. C C

4. 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, pr on an attachment with an address.