## 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 DIVISION OF CORPORATIONS

## **DOCUMENT #** F97000005666 (9)

US SALT HOLDINGS, INC.

Principal Place of Business	Mailing Address
STE. 306	3740 BEACH BLVD., STE. 306

## **FILED** Feb 06 1998 8:00am Secretary of State

JACKSONVILLE FL 32207 JACKSONVILLE FL 32207 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/28/1997 2. Principal Place of Business 2a. Mailing Address 4 FEI Number Applied For 59-3474348 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 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip 8. This corporation owes or has paid the current year Intangible 25 29 Personal Property Tax due June 30. Yes Yes 24 30 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 City Zip Code 84 85 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change \_\_ DELETE Director X Addition 1.1 TITLE TITLE James C. Cook DEMETREE, MARK C 1.2 NAME NAME 3740 BEACH BLVD., STE. 306 3740 Beach Blvd. Suite 306 STREET ADDFESS 1.3 STREET ADDRESS JACKSONVILLE FL 32207 Jacksonville, FL 32207 CITY-ST-ZIP 1.4 CITY - ST-ZIP DELETE Change X Addition TITLE Director NAME DOLAN, TIMOTHY P 2.2 NAME Ted A. Gardner 3740 Beach Blvd., Suite 306 Jacksonville, FL 32207 3740 BEACH BLVD., STE. 306 STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE FL 32207 CITY - ST - ZIP 2. 4 CITY-ST-ZIP \_\_\_ Change DELETE Vice Pres. Assistant Sec. TITLE 3.1 TITLE Gerald M. Murphy NAME 3.2 NAME 3740 Beach Blvd., Suite 306 STREET ADDRESS 3.3 STREET ADDRESS Jacksonville, FL 32207 CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE \_\_ Change Addition TITLE 4. 2 NAME NAME STREET ADORESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 62 NAME 6.3 STREET ADDRESS STREET ADDRESS City-St-ZiP

4. I hereby certify that the information supplied with this filling 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 13 if changed, or on an attachment with an address.

SIGNATURE:

witte Pit

904-306-2000