

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

FILED
Mar 16 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 # F97000006899 (5)

1. Corporation Name
GEORGE L. STOCKMAN, INC.

Principal Place of Business
24 MANOR LANE
E. FALMOUTH MA 02536

Mailing Address
24 MANOR LANE
E. FALMOUTH MA 02536

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1897 BREAKERS POINTE WAY Suite, Apt. #, etc.		2a. Mailing Address 26 1897 BREAKERS POINTE WAY Suite, Apt. #, etc.		3. Date Incorporated or Qualified 12/29/1997	
22 City & State 23 WEST PALM BEACH, FL 24 Zip 33411 25 Country USA		27 City & State 28 WEST PALM BEACH, FL 29 Zip 33411 30 Country USA		4. FEI Number 05-0446202 Applied For <input type="checkbox"/> Not Applicable	
23 WEST PALM BEACH, FL		28 WEST PALM BEACH, FL		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 WEST PALM BEACH, FL		28 WEST PALM BEACH, FL		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23 WEST PALM BEACH, FL		28 WEST PALM BEACH, FL		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent STOCKMAN, ESTELLE S 1897 BREAKERS POINTE WAY WEST PALM BEACH FL 33411		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
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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 N/A
Signature typed or printed name of registered agent and filed if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT STOCKMAN, GEORGE L 24 MANOR LANE E. FALMOUTH MA 02536 <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1897 BREAKERS POINTE WAY WEST PALM BEACH, FL 33411
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S STOCKMAN, ESTELLE S 234 RIVER PARK RD. JUPITER FL 33477 <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1897 BREAKERS POINTE WAY WEST PALM BEACH, FL 33411
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  GEORGE L. STOCKMAN 3/9/98 561-790-7142

CR2E034 (10/97)