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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F99114

O.R.E.O., INC.

Principal Place of Business

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Mailing Address

FIRST UNION NATIONAL BANK OF FLORIDA LEGAL DIVISION 225 WATER ST. JACKSONVILLE FL 32231-7010

FIRST UNION NATIONAL BANK OF FLORIDA LEGAL DIVISION 225 WATER ST.

FILED May 18 1998 8:00am Secretary of State



JACKSONVILLE FL 32231-7010 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/13/1982 2, Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2497782 21 26 Not Applicable Suite, Apt. #, etc Suite. Apt. #, etc \$8.75 Additional 5, Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution

8. This corporation owes or has paid the current year liftaggible

1. Trust Fund Contribution

1. Trust Fund Contribution

1. Trust Fund Contribution 23 28 Country Zip Zip Country 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) SUITE 105 83 TALLAHASSEE FL 32301 84 City Zip Code 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 agriculand title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELFTE TITLE 1.1 Uli F NAME MILLER, JERRY M JR 1.2 NAME E034 301 S COLLEGE ST STREET ADDRESS 1.3 STREET ADDRESS CHARLOTTE NC CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE Change Addition 2.1 TOTLE HODNETT, BRYON E NAME 22 NAME 225 WATER ST. STREET ADDRESS 23 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DEL ETE TITLE 3." TITLE Change Addition MITCHELL, JOHN A. W NAME 3.2 NAME 225 WATER ST. STREET ADDRESS 3.3 STREET ADORESS JACKSONMLLE FL 3 4. CITY - ST - ZIP CITY-ST-ZIP DELETE TITLE 4 1 TIBLE Change Addition WERTZ, LARRY J. NAME 4 2 NAME 225 WATER ST. STREET ADDRESS 4.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 44 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 TITLE Change Addition 6.1 TITLE NAME 6 2 NAME STREET ADDRESS € 3 STREET ADDRESS

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 or an attachment with an address.

E.4 CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR