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Control of Contro	F	PROFIT			Jan 15 1998	8:00am
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HOWTON & ASSOCIATES, INC.		5. 4.94		• • • •	Secretary	JI State
HOWTON & ASSOCIATES, INC.  Additional Place of Business No. OK, STREET Additional Additional Street Street Additional Street Addit Street		MENT # G0580	04 (1)			
Mailing Address       Mailing Address       MAX Dev Alster       XXX DWLLE R. 2224-1408       XXX DWLLE R. 22210       XXX DWLLE R. 22210       XXX DWLLE R. 22210       XXX DWLLE R. 22210       XXX DWLLE R. 2210 </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
Mailing Address       Mailing Address       MAX Dev Alster       XXX DWLLE R. 2224-1408       XXX DWLLE R. 22210       XXX DWLLE R. 22210       XXX DWLLE R. 22210       XXX DWLLE R. 22210       XXX DWLLE R. 2210 </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
ACKSONVILLE FL 3220-1408  ACKSONVILLE FL 3220-1408  DO NOT WRITE IN THIS SPACE  S. Date Incorporated or Qualified 10/25/51/982  Principal Place of Business  a. Mailing Address a. Availing Address a. Busine Comparison Country a. Busine Address of Business a. Busine Comparison Country a. Busine Address of Business a. Busine Comparison Country a. Busine Address of Business a. Busine Comparison Country a. Busine Address of Business a. Busine Comparison Country a. Busine Address of Business a. Busine Comparison Country a. Busine Address of Country a. Busine Address of Country a. Busine Address of Country a. Busine Country a. Busin	Principal Place	e of Business	Mailing Address			
Principal Place of Buainess     12, Mailing Address     12, Mailing Address     1, Principal Place of Buainess       Site, Apt. 8, etc.     28       Site, Apt. 8, etc.     21       City & State     20       Country     20				l-1408	DO NOT WRITE IN	I THIS SPACE
Principal Pace of Budiness       2a. Mailing Address       4. FEI Number       Append or an appendix of the appendix						
Suite, Apt. #, etc.       Suite, Apt. #, etc.       s. Centrification of Status Desired       S87.75 Actitional Fee Required         City & State       Oily & State       City & State       s. Centrification of Status Desired       S87.75 Actitional Fee Required         Zity       Country       Zity       Country       Site, Apt. #, etc.       s. State, Apt. #, etc.         Zity       Country       Zity       Country       Apt. Encoded       State, Apt. #, etc.         Zity       Site, Apt. #, etc.       State, Apt. #, etc.       State, Apt. #, etc.       State, Apt. #, etc.         Zity       Zity       Zity       Country       Apt. #, etc.       State, Apt. #, etc.       State, Apt. #, etc.         Zity       Zity       Zity       Zity       Country       Apt. #, etc.       State, Apt. #, etc.       State, Apt. #, etc.       State, Apt. #, etc.       Apt. Apt. #, etc. </td <td>Principal Pl</td> <td>ace of Business</td> <td>2a. Mailing Address</td> <td></td> <td></td> <td>Applied For</td>	Principal Pl	ace of Business	2a. Mailing Address			Applied For
Image: constraint of the provided systemed agent in the provided systemed agent of backshops of provided systemed agent in an end of agent	Suite, Apt.	# etc				Not Applicable
Zip         Zip         Zip         Added to Peess           27p         Country         and         Thits corporation owes or has paids the current year intendible Presonal Property at due June 20.         Weils in the presonal Property due June 20.         We	2 27				5. Certificate of Status Desired	
23     29     30     Personal Property Tax dia-June 30.     20 <sup>-</sup> / <sub>2</sub> Kas     No       0     Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent     10. Name and Address of New Registered Agent       HOWTON, HUGH K.     4907 ORTEGA FOREST DRNE     JACKSONVILLE FL 32210     32 <sup>-</sup>	City & State	9				
g. Name and Address of Current Registered Agent     HOWTON, HUGH K.     4907 ORTEGA FOREST DRIVE     JACKSONVILLE FL 32210     B3     B4     City     FL     B5     Zib Code     B3     B3     B3     B4     City     FL     B5     Zib Code     B3     B				<u>-</u>		
APPT ORTEGA FOREST DRIVE     JACKSONVILLE FL 32210 497             ORTEGA FOREST DRIVE             JACKSONVILLE FL 32210             4             2	۱ 					
JACKSONVILLE FL 32210						
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 acent the obligations of, Section 607.050, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered acent, and another acent the obligations of, Section 607.050, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered acent at a florida statutes.           SNATURE				82 Street Add	ress (P.O. Box Number is Not Acceptable	}
Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the provise of changing its registered sections of registered accept the obligations of, Section 607 0502, Florida Statutes, the obligations of, Section 607 0502, Florida Statutes, the obligations of, Section 607 0503, Florida Statutes, and the obligations of, Section 607 0503, Florida Statutes, and the obligations of, Section 607 0503, Florida Statutes, and the obligations of, Section 607 0503, Florida Statutes, and the obligations of, Section 607 0503, Florida Statutes, and the obligations of, Sections 112, Sections 113, Sections 112, Secti				83		
The providence of charging 15: registered agent, 1 am termilar with, and accept the obligations of, Section 607.0502, Florida Statutes, the abuehanded optimise the composition is board of directors. I hereby accept the optimitant as registered agent, 1 am termilar with, and accept the obligations of, Section 607.0505, Florida Statutes,  SINATURE  Signetza, test of private many and accept the obligations of, Section 607.0505, Florida Statutes,  ChOTE Registered Agent, or obtain, in the State of Florida, Such of OR, OSC, Florida Statutes,  SINATURE  Signetza, test of private many and accept the obligations of, Section 607.0505, Florida Statutes,  ChOTE Registered Agent, or obtain the obligations of, Section 607.0505, Florida Statutes,  ADDITION/S/CHANGES TO OFFICERS AND DIRECTORS  SINATURE  Signetza, test of private many and accept the obligations of, Section 607.0505, Florida Statutes,  PD  CFFICERS AND DIRECTORS  SINATURE  Signetza, test of private many and accept the obligations of, Section 607.0505, Florida Statutes,  HOWTON, HUGH K,  SINATURE  PD  Charge Charg				84 City		FL 85 Zip Code
EE       PD       DELETE       1.1 TITLE       Change       Addition         WE       HOWTON, HUGH K.       12 MANE       12 MANE       13 STREET ADDRESS       Addition         V-ST-ZP       JACKSONVILLE FL       DELETE       21 TITLE       DeleTE       21 TITLE       DeleTE       Addition         V-ST-ZP       JACKSONVILLE FL       DELETE       21 TITLE       DeleTE       21 STREET ADDRESS       Addition         V-ST-ZP       JACKSONVILLE FL       DELETE       21 STREET ADDRESS	IGNATURE					DATE
Weile     HOWTON, HUGH K.     12 Make       LEET ADDRESS     4907 ORTEGA FOREST DR     13 STRET ADDRESS       V-ST-2P     JACKSONVILLE FL     14 CITV-ST-2P       LEE     STD     DELETE     21 TITLE       LE     MOWTON, JANE B     2.3 STRET ADDRESS	2.				ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
Lin Doubles       JACKSONVILLE FL       100 minutes         Visit Signature       STD       100 minutes         Lie       STD       100 minutes         Lie       STD       100 minutes         Lie       STD       100 minutes         HOWTON, JANE B       22 MANE       23 sineer ADDRESS         JACKSONVILLE FL       24 000 minutes       4 000 minutes         Y-ST-2P       24 000 minutes       1 00 minutes         Lie       100 minutes       3 sineer ADDRESS         Y-ST-2P       24 000 minutes       1 minutes         Lie       10 DELETE       3.1 minutes       1 change         Addition       32 sineer ADDRESS       4 000 minutes       1 change         Y-ST-2P       34 000 minutes       4 000 minutes       1 minutes       1 change         V-ST-2P       34 000 minutes       4 000 minutes       1 minutes       1 change       1 Addition         V-ST-2P       34 000 minutes       4 1 minutes       1 change       1 Addition         V-ST-2P       44 000 minutes       1 minutes       1 change       1 Addition         V-ST-2P       44 000 minutes       5 1 minutes       1 change       1 Addition         V-ST-2P       5 0 ElletTe	AME	HOWTON, HUGH K.				RS AND DIRECTORS IN 12
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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.	ITY-ST-ZIP	certify that the information supplied	with this filling does not qualify fo	6.4 CITY-ST-ZIP	Section 119.07(3)(i), Florida Statutes. I fu	rther certify that the information
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