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CORPORATION ANNUAL REPORT

1998

DOCUMENT #

SUITE 2

SARASOTA FL 34236



G07397

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(4)

## ATLANTIC SOUTHERN PRODUCTIONS, INC.

Principal Place of Business Mailing Address 8950 SILKWOOD CT. PO BOX 1299 SARASOTA FL 34238 OSPREY FL 34229 DO NOT WRITE IN THIS SPACE 1JS 3. Date Incorporated or Qualified 11/05/1982 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2244677 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing  $\Box$ Trust Fund Contribution 23 28 Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30, Z Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name STANLEY E MARABLE 677 N WASHINGTON BLVD Street Address (P.O. Box Number is Not Acceptable)

84 City 85 Zip Code FI 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.

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SIGNATURE ted name of registered agent and title if applicab (NOTE, Registered Agent signal) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. PVD DELETE 1.1 TITLE Change Addition TITLE NAME WINDER, WILLIAM RAY, JR. 1.2 NAME 8950 SILKWOOD CT. 1.3 STREET ADDRESS STREET ADDRESS SARASOTA, FL 00000 1.4 CITY - ST- ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE NAME PARKER, DIANE A'DELL 2.2 NAME STREET ADDRESS 2454 E. BURR OAK CT. 2.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE WINDER, WILLIAM RAY, III 3.2 NAME NAME 8963 SILKWOOD CT STREET ADORESS 3.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 3.4. CiTY-ST-ZiP Change Addition DELETE TITLE 4.1 TETLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-2IP ☐ DELETE Change ☐ Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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 changeril, or an attachment with an address

SIGNATURE:

918:0638

**FILED** 

Jan 21 1998 8:00am

Secretary of State

CR2E034