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 # G11226

(9)

THE LAW SOURCE, INC.

Principal Place of Business

Mailing Address

FILED Apr 22 1998 8:00am Secretary of State



5001 NW 27TH CT Gainesville FL 32606			5001 NW 27TH CT GAMESVILLE FL 32606				DO NOT WRI	TE IN THIS	SPACE		
							3. Date Inco	orporated or Qualifie			
2. Principal Place of Business 21			2a. Mailing Address 26				4. FEI Numb			—	plied For at Applicable
Suite, Apt. #, etc.			Suite, Apt #, etc.					e of Status Desired		\$8.75 / Fee Re	I
City & 5		28	+			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip 24	Count 25	29				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No					
9, Name and Address of Current Registered Agent						A 1	10. Name an	d Address of New	Registered	Agent	
	LODGE, JOHN S.			1	81	Name					
	5001 NW 27TH CT GAINESVILLE FL 32600	3				Street Add	lress (P.O. Box N	umber is Not Accep	table)		
	$\frac{d}{dx}$]	83			9.			J
				[1	84	City			a FL	85 Zip (Code
11. Pursu	ant to the provisions of Sec	tions 607 0502 and 60	7 1508 Florida Statut	es the ab	OVE-	named corr	poration submits	this statement for the		changing it	s registered
office.	or registered agent, or bot	 b. in the State of Florida 	 Such change was a 	authorized	bv t	he corpora	tion's board of di	rectors. I hereby acc	cept the app	ointment as	registered
agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE											
Signature typed or printed name of registered agent			and title if applicable (NOTE: Registered A			signature requ	red when re-nstating)		DATE		
12.		DELICERS AND DIRECT		13.			ADDITION	S/CHANGES TO OF	FICERS AND		
TITLE	VD	NID W	☐ DELETE	1.1 Titt						☐ Change	Addition
NAME	JOHNSON, ARTH	IUN TI		1.2 NAM							
STREET ADDRE	NEWBERRY FL					DORESS					
TITLE	VID		DELETE	1.4 CIT 2 1 TITL		ZIr				Change	Addition
NAME	WALSTON, E HO	YT		2.2 NAN	NE	- 1					
STREET ADDRE	AAR NE 4091 AN			2.3 STR	EET AI	DDRESS			٠.		ļ
CITY-ST-ZIP	GAINESVILLE FL			2. 4 CIT	Y-ST	- ZIP					
TITLE	PD	•	DELETE	3.1 TITL	LE	T				Change	Addition
NAME	KRUGER, BRIAN			3.2 NAM	ME						
STREET ADDRE		I PLACE		3.3 STR		i i					1
CITY-ST-ZIP	GAINESVILLE FL		DELETE	3.4. CIT	_	- ZIP				Change	Addition
TITLE NAME	MORRISON, JEN	NIFFR .I	□ Dereit	4.1 1ITL 4. 2 NAI						L Change	T WOOHION
STREET ADDRE	MARK AND AND					DDRESS					
CITY-ST-ZIP	MIAMI FL			4.4 CH							Į
TITLE	VOC		DELETE	5 1 THE						Change	Addition
NAME	LODGE, JOHN S			5.2 NAN	ΛE	Ì					[
STREET ADDRE		ERR		5.3 STR	ELT AC	DORESS					
CITY-ST-ZIP	GAINESVILLE FL			5.4 CITY		ZiP				·	
TITLE	VSD	SDIE II	DELETE	6.1 TITL						Change	Addition
NAME	MALAGODI, MAJ			6.2 NAN							
STREET ADDRE		RYENUE		6.3 STR		i i					
CITY-ST-ZIP	GAINESVILLE FL			6.4 CIT	Y - S1-	ZIP					

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 supplicemental 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.

Main a 1 notar Whit 08 357-376-9511