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 # 1. Corporation Name

(7)

UIBLE COMPANY, INC.

FILED Feb 02 1998 8:00am Secretary of State

rincipal Place of Business	Mailing Address					
225 Water Street BTE 840 IACKSONVILLE FL 32202 JS	225 WATER STREET STE 840 JACKSONVILLE FL 32202	DO NOT WRITE IN THIS SPACE				
	U\$	3. Date Incorporated or Qualified 12/20/1982				
Principal Place of Business	2a. Mailing Address	4. FEI Number Applied For				

JACKSONVILLE FL 32202		J.	JACKSONVILLE FL 32202					DO NOT WRITE IN THIS SPACE				
US			t	US					3. Date Incorporated or Qualified			
									12/20/1982			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Applied For				
21			26						59-2263292		Not Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.			\$8.75 Additional		75 Additional			
22			27	5					5. Certificate of Status Desired Fee Requ		e Required	
City & State				City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		.00 May Be			
28												
_	Zip	Country		Zip Coun			lry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
24	[:	25	29	30								
	g, Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent				
CRAWFORD, JOHN R.					8	1	Name					
225 WATER STREET SUITE 900				_	_							
				8	2	Street Address (P.O. Box Number is Not Acceptable)						
				8	33							
	UNITOONTILL	- 1 - APENE										
						8	4	City	F = 1	85	Zip Code	
	· <u></u>	10					لــــــــــــــــــــــــــــــــــــــ		FL			
11	 Pursuant to the provision office or registered age 	ons of Sections 607. Pot. or both in the S	0502 and 6 tate of Florid	07.1508, Flor da. Such cha	ida Statute nge was al	s, the abouthorized b	ve- hv	named corpo	oration submits this statement for the purpose of coors board of directors. I bereby accept the appoint	hang	ing its registered	

agent. I ar	n familiar with, and accept the obligations of, b	Section 6 07.05 05 , Flo	rida Statutes.	••••••••	
SIGNATURE	Signature, typed or printed name of registered agent and title if a	applicable (NOT	Registered Agent signature requ	uired when reinstating) DATE	
12.	OFFICERS AND DIRECT		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	S IN 12
TITLE	PO	DELETE	1.1 TITLE	Change	Addition
NAME	UIBLE, JOHN D		1.2 NAME		
STREET ADDRESS	4765 ORTEGA BLVD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 00000		1.4 CITY - ST - ZIP		
TITLE	D	DELETE	2 1 TITLF	Change	Addition
NAME	UIBLE, MARY JANE		22 NAME		i
STREET ADDRESS	4765 ORTEGA BLVD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 00000		2. 4 CITY-ST-ZIP		
TITLE		DELET E	3.1 TITLE	☐ Change	Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	☐ Change	Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TIFLE		DELETE	5.1-TITLE	☐ Change	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		Ì
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	Change	Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 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 13 if changed or on an attachment with an address.

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