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 # G18955

(6)

4280 CORPORATION

Mar 26 1998 8:00am Secretary of State



Principal Place of Busin	ness	Mailing Address				T SOBJEKT BOOK HOOM HOUSE BREAT BREAT BEEKL BEGIN BEREIT BEREIT BEGIN DE SELECTION	
4280 S WASHINGTON AVE		4280 S WASHINGTON AVE					
TITUSVILLE FL 32780		TITUSVILLE FL 32780					
						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 01/17/1983	
2. Principal Place of Bu	usiness	2a. Mailing Address				4. FEI Number Applied For	
21		26				59-2248865 Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional	
22		27				Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution Added to Fees	
Zip	Country	Zιρ	L Co	untry		8. This corporation owes or has paid the current year Intangible	
24	25	29	30			Personal Property Tax due June 30. Yes No	
	me and Address of Current	Registered Agent		1		10. Name and Address of New Registered Agent	
KENASTON				81	Name		
	SHINGTON AVE				Street Add	dress (P.O. Box Number is Not Acceptable)	
TITUSVILLE	FL 32780			Ш	2 Street Address (P.O. Box Number is Not Acceptable)		
Charles of the	• '	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		83	* ., * .		
		•		84	City	FL 85 Zip Code	
dd. Discounat to the ave	visions of Continue CO7 0LO3	and 007 1500 Flavida Dial	uso the			FL	
office or registered	agent, or both, in the State of	of Florida. <u>Such change w</u> as	authorize	ed by	the corpora	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	
agent. I am fa milia	with, and acceptable obligat	ions of, Section 607.0505, F	lorida 8	atutes	-/ 1	2 - 2	
SIGNATURE		uas 🔾	$-\mu$	lsi	sur	3-20-94 Ured when reinstating) DATE	
	ped or printed name of registered agent OF LICERS AND				nt signature requ		
12.	OFFICEND AND	DELETE	13.	ritlé	-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
II.Z.	STON, JAMES H			NAME			
	S. WASHINGTON AVE				ADDRESS		
	VILLE FL			CITY-S			
TITLE 8	<u> </u>	DELETE	_	IITLE	1-211	☐ Change ☐ Addillon	
1 4	STON, JEANNE H			NAME	1		
	S. WASHINGTON AVE				ADDRESS		
	VILLE FL				1		
TITLE	***************************************	DELETE		CITY-S	11-7/17	Change Addition	
NAME				NAME			
STREET ADORESS					ADDRESS		
· ·			1		i i		
CITY+ST-ZIP TITLE		DELETE		CITY-S TITLE	1 - ZIF	☐ Change ☐ Addition	
NAME				NAME		- Journey	
STREET ADDRESS					ADDRESS		
CITY+ST-ZIP				STREET STY-S			
TITLE		DELETE	5.1 1		1-117	☐ Change ☐ Addition	
NAME				NAME		_ stange _ Notified	
STREET ADDRESS					ADDRESS		
					ADDRESS		
CITY-ST-ZIP TITLE		☐ DELET E	6.1 1	CITY-SI	1-2117	Change Addition	
NAME expert appende				NAME	*DDDECC		
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		6.4 (HTY-SI	I-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 fusion 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 for on an attachment with an address.