SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Jul 29 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS DOCUMENT # JESSE E. STEWART, INC. Principal Place of Business Mailing Address 101 INDIAN ROCKŚ ROAD NORTH 13914 B4TH TERRACE NORTH **BELLEAIR BLUFFS FL 34640** SEMINOLE FL 34642 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/19/1983 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 <u>59-2281366</u> Not Applicable Sulte, Apt. #, etc. Sulte, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name Stewart, Jesse E २८७ Stewart 13914 84 TERR. N. 82 SEMINOLE FL 34646 84 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. SIGNATURE ed agont ago title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE 1.1 TITLE Change Addition DELETE CR2E034 STEWART, JESSE E. NAME 1.2 NAME **13914 84TH TERRACE** 1.3 STREET ADDRESS STREET ADDRESS SEMINOLE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 2.1 TITLE NAME STEWART, JOANN P 2.2 NAME **13914 84TH TERRACE** 2.3 STREET ADDRESS STREET ADDRESS **SEMINOLE FL 34646** 2.4 CITY-ST-ZiP CITY-ST-ZIP 3.1 TITLE TITLE DELETE Change Addition STEWART, ROSS E. 3.2 NAME NAME 12323 103 ST N 3.3 STREET ADDRESS STREET ADDRESS LARGO FL 3.4 CITY-ST-ZIP CITY-ST-ZiP 4.1 TITLE TITLE DELETE Change Addition NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 6.1 TITLE TITLE DELETE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 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 changed, or on an attagramment with an address.

FILED