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 # G74420 (2)

X.S. SMITH OF FLORIDA, INC.

FILED Feb 10 1998 8:00am Secretary of State

Principal Place of Business Mailing Address							. 1686111 8811 18811 81811 61818 1		ALBIN BIBIT BI	WIN BLOKE FROM
2122 WHITFIELD PARK AVE SARASOTA FL 34243-4048			2122 WHTFIELD PARK AVE SARASOTA FL 34243-4048			DO NOT WRIT	E IN THIS :	SPACE		
							3. Date Incorporated or Qualified			
							12/19/1983			
	Place of Business	2a.	Mailing Address				4. FEI Number		P	Applied For
21		26				- · · - · -	59-239 1528			Not Applicable
			Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & State			City & State				Election Campaign Financing Trust Fund Contribution			May Be I to Fees
Zip Country Z			Z ip				8. This corporation owes or has p			
24				30	Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent				□ No	
	9. Name and Address of Curren	t Regis	tered Agent	8	a	Name	10. Name and Address of New H	egistered	Agent	i
	LT, TERRI, JAYNE			*	'	Name				İ
% WILLIAMS PARKER HARRISON DIETZ & GETZEN 1550 RINGLING BOULEVARD							ess (P.O. Box Number is Not Accepta	ible)		
SARASOTA FL 34230-3258				8:	3					
·				8	4	City		FL	85 Zip	Code
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.										Its registered s registered
SIGNATURE										
Signature, typed or printed name of registered agent and trills if applicable INOTE Regi						nt signature require		DATE		
12.	OFFICERS ANI	D DIRE	DELETE	13.			ADDITIONS/CHANGES TO OFF	CERS AND		
TITLE	D THOMBOON II FONEST		•		1.1 TITLE				L. Change	Addition
NAME	THOMPSON, H. ERNEST		1.2 NAI							Į.
STREET ADDRESS	2122 WHITFIELD PARK AVE					ADDRESS				
CITY-ST-ZIP TITLE	SARASOTA FL PD		DELETE 2.1 TI		CITY-ST-ZIP				Change	☐ Addition
NAME	SMITH, RICHARD W., JR.			2.2 NAM		l			onange	
STREET ADDRESS	2122 WHITFIELD PARK AVE			2.3 STRE		ADDOCCO.				
	SARASOTA FL									
CITY-ST-ZIP TITLE	COB		DELETE	2. 4 C/TY 3.1 TITLE		1-ZIP			Change	Addition
NAME	SMITH, RICHARD W., SR.		_ otten	3.1 ITLE					visings	
STREET ADDRESS	2122 WHITFIELD PARK AVE			3.3 STREE		ANNDECC				l
CITY-ST-ZIP	SARASOTA FL		3.4.0							l
717LE	D			41 TITLE		1-21			Change	Addition
NAME	THOMPSON, BARBARA J.			4. 2 NAM						
	ETZZ WINTFIELD PARK AVE	_		4.3 STREE		ADDRESS				
CITY-ST-ZIP	SARASOTA FL			4.4 CITY						l
TITLE	TD		DELETE	5.1 TITLE					Change	Addition
NAME	DIFIORE, CHERYL A			5.2 NAME	Ξ					l
STREET ADDRESS	2122 WHITFIELD PARK AVE.			5.3 STRE	ET A	ADDRESS				ì
CITY-ST-ZIP	SARASOTA FL 34243			5.4 CiTY						1
TITLE	VSD		DELETE	6.1 TITLE					Change	Addition
NAME	THOMPSON, SCOTT S			6.2 NAME						l
STREET ADDRESS	2122 WHITFIELD PARK AVE.			6.3 STREI	ET /	ADORESS				l
CITY-ST-ZIP	SARASOTA FL			6.4 CITY						
\$4 becoby		itte stein i	ling does not evalide				Section 119 07/31(i) Florida Statutas	1 5 orthor co	etify that th	o information

Intereoy certify that the information supplied with this hing 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 cath; 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

1/21/198

800-121-22212