FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G83881

(4)

Mailing Address

THE DUKE COMPANIES, INC.

FILED
Jan 23 1998 8:00am
Secretary of State



% FREDERICK M. WILLIAMS 411 E. MONROE ST. JACKSONVILLE FL 32202		% FREDERICK M. WILLIAMS 411 E. MONROE ST. JACKSONVILLE FL 32202			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
						02/03/1984	ou		
2. Principal Pl	ace of Business	2a. Mailing Address			4, FEI Number		A	pplied For	
	E. Monroe St.		437 E. Monroe St.			59-2675070			lot Applicable
Suite, Apt.		Suite, Apt. #, etc.				S8 75 Additional			
22		27	27			5, Certificate of Status Desired	'Ă	Fee R	lequired
City & State		City & State				6. Election Campaign Financin	g	\$5.00	May Be
23 Jacks	sonville, Fl.	28 Jacksonv	28 Jacksonville, Fl.			Trust Fund Contribution			to Fees
Zip	Country	Zip	Сои	Country		8. This corporation owes or ha	s paid the cu	rrent year In	ntangible
24 3220	02 25 Duval	29 32202	30 I	30 Duval		Personal Property Tax due c	lune 30.	Yes [X No
	g. Name and Address of Curi	rent Registered Agent				10. Name and Address of Nev	Registered	Agent	
WIL	LIS, LYNWOOD G			81	Name				
415	EAST MONROE ST		82 Street Add		Street Addr	ess (P.O. Box Number is Not Acce	ntable)		
JAC	XSONVILLE FL 32202					E. Monroe St.			
			ľ	83	1 ————	cksonville, Fl. 32202			
			-	84	ļ <u></u>	sonville		85 Zip	32202
							FL	•	
office or re	poistered agent, or both, in the Sta	ate of Florida. Such change was	authorized	d by	/ the corporati	oration submits this statement for t ion's board of directors. I hereby a	he purpose o ccept the app	f changing pointment as	its registered s registered
agent. I ar	m familiar with, and accept the ob	ligations of, Section 607.0505, F	Iorida Stati	utes	š.				
SIGNATURE .	Signature typed or printed name of registered	enert and title describerable (NC)	11 - Pagistores	1 4 7 0	ant signature require	ed when reinstating)	DATE		
12.		AND DIRECTORS	13.	- Nge	in signature require	ADDITIONS/CHANGES TO O		DIRECTO	RS IN 12
TITLE	DVS	DELETE	1,1 7(1	TLE		ABBITIONS/BIT/MAZO TO C	THOE TO THE	☐ Change	Addition
NAME	WILLIS, LYNWOOD G		1.2 NA						
STREET ADDRESS 415 E. MONROE ST.				1.3 STREET ADDRESS					
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CI		1				
TITLE	DPT	DELETE	2.1 TiT		1-20			Change	☐ Addition
NAME	SULLIVAN, LINDA		2.2 NA						
STREET ADDRESS	415 E. MONROE ST.				ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL				ST-ZIP				
TITLE		DELETE	3.1 (()		11-211			Change	Addition
NAME			3.2 NA					v-	_ `
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP					ST-ZIP				
TITLE		DELETE	4.1 TIT		11-611			Change	Addition
NAME			4. 2 N						
STREET ADDRESS					ADDRESS				
			4.3 ST						
CITY-ST-ZIP TITLE		DELETÉ	5.1 TIT		1.714		 .	Change	Addition
NAME		_ otter	5.1 II) 5.2 NA		-				, , add (1011
					ADDRESS				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		DELETE	5.4 CIT 6.1 TIT	_	F-ZIP			Change	Addition
TITLE		U VILLE						FT CHAINE	☐ vanimini
NAME			6.2 NA						
STREET ADDRESS			6.3 ST	REET	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 12 or Block 13 if chapter, or on an attachment with an address.

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