

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

FILED
Apr 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G91325** (2)
1. Corporation Name
FOOTERS, INC.



Principal Place of Business 500 W AIRPORT BLVD APT 1508 SANFORD FL 32773 US	Mailing Address PO BOX 697 SANFORD FL 32772 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 120 Railroad Ave. Suite, Apt. #, etc. 22 SANFORD, FL. City & State 23 Zip 24 32764 Country 25 US		2a. Mailing Address 26 P.O. Box 7 Suite, Apt. #, etc. 27 City & State 28 Osteen, FL. Zip 29 32764 Country 30 U.S.		3. Date Incorporated or Qualified 03/14/1984	
		4. FEI Number 59-2450901		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent TAYLOR, CLIFTON I., SR 500 W AIRPORT BLVD APT 1508 SANFORD FL 32773				10. Name and Address of New Registered Agent 81 Name TAYLOR, CLIFTON I., SR. 82 Street Address (P.O. Box Number is Not Acceptable) 120 RAILROAD AVE. 83 P.O. Box 7 84 City Osteen FL 85 Zip Code 32764			
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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.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST <input type="checkbox"/> DELETE	1.1 TITLE	PST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TAYLOR, CLIFTON I. S	1.2 NAME	TAYLOR, CLIFTON I. S
STREET ADDRESS	500 W AIRPORT BLVD APT 1508	1.3 STREET ADDRESS	120 RAILROAD AVE. P.O. Box 7
CITY-ST-ZIP	SANFORD FL	1.4 CITY-ST-ZIP	Osteen, FL. 32764
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	Bloodsworth, Louis
STREET ADDRESS		2.3 STREET ADDRESS	120 RAILROAD AVE. P.O. Box 7
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Osteen, FL. 32764
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 attachment with an address.

SIGNATURE:

Clifton I. Taylor

4/16/98

CR2E034 (10/97)