## 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 # 1. Corporation Name H02410

(9)

SPEIR ACCOUNTING SERVICE, INC.

Principal Place of Business

Mailing Address

## **FILED** May 06 1998 8:00am Secretary of State



1385 CASSAT AVE JACKSONVILLE FL 32205		1365 CASSAT AVE JACKSONVILLE FL 32205		-				
UNIVOCATABILLE EL SECUS		PHOMOUTIVILLE FL 18203		DO NOT WRITE IN	DO NOT WRITE IN THIS SPACE			
					<ol> <li>Date Incorporated or Qualified</li> <li>05/07/1984</li> </ol>			
2. Principal Pla	ace of Business	2a. Mailing Address	2a. Mailing Address		4, FEI Number	App	olied For	
21	_	26			59-2404466	Not	Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5, Certificate of Status Desired	¬ \$8.75 ∧		
22		27		5, Certificate of Status Desired	Fee Rec	<del>`</del>		
City & State		City & State			6. Election Campaign Financing	\$5.00 i		
23		28			Added to			
Zip	Country	<i>Ζ</i> φ	Coun	try	, ,	8. This corporation owes or has paid the current year Intangible		
24	25   29   30   Name and Address of Current Registered Agent		30		Personal Property Tax due June 30. X Yes No  10. Name and Address of New Registered Agent			
	<del></del>	ent Registered Agent		31 Name		tereo Agent		
	EIR, EDWARD E.							
	1 GRANDVIEW DR.		ļī.	32 Street	et Address (P.O. Box Number is Not Acceptable)			
JAL	CK <b>SO</b> NVILLE FL 32211			33				
			. [	~				
			[7	34 City		FL 85 Zip C	ode	
44 Durament t	o the provisions of Continue 607 OF	02 and 607 1508 Florida Statu	too the ab	nuo namon	and cornoration submits this statement for the pure	- <del> </del>	registered	
office or re	o the provisions of Sections 607.05 ogl <mark>stered age</mark> nt, or both lin the Stat	e of Horida, Such change was	authorized	by the cor	ed corporation submits this statement for the purp propration's board of directors. I hereby accept the	ne appointment as r	egistered	
agent. I ar	<b>n familiar with, and accept the obli</b>	gations of, Section 607.0505, 13	lorida Statu	tes.				
SIGNATURE	Stgnature, typed or printed name of registerest a	oont and title if applicable /NO	TE Repistered	Agent signatur	ure required when reinstating)	DATE		
12.		ND DIRECTORS	13.	g 5-griddin	ADDITIONS/CHANGES TO OFFICER		5 IN 12	
TITLE	D	DELETE	1.1 TITL	E		☐ Change	☐ Addition	
NAME	SPEIR, EDWARD E.		1.2 NAM	<b>A</b> E				
STREET ADDRESS			1.3 STR	FET ADDRESS	s .			
CITY-ST-ZIP	IAOUGOARALE EL		1.4 C(T)	(-ST-ZIP				
TITLE	DELETÉ 21 T		2 1 TITL			☐ Change	Addition	
NAME	<b>Speir, Sondra</b> D.		2 2 NAM	<b>ME</b>				
STREET ADDRESS	1321 GRANDVIEW DRIVE	23:		EET ADDRESS	s		1	
CITY-ST-ZIP	JACKSONVILLE FL		2 4 CIT	Y-S1-ZIP				
TITLE	☐ DELFTE 31		3 1 TITE	E		☐ Change	L_ Addition	
NAME			3 2 NAM	AE .			1	
STREET ADDRESS			3 3 STR	eet address	s L			
CITY-ST-ZIP				Y-ST-ZIP			The state of the s	
TITLE	i i		4 1 1110			L Change	Addition	
NAME			4 2 NA					
STREET ADDRESS				EET ADDRESS	S			
CITY-ST-ZIP		pereze		r-ST-ZIP	<del>-</del>	Change	Addition	
TITLE			5.1 TITE			L_1 change	LT MODITION	
NAME			5.2 NAM					
STREET ADDRESS				EET ADDRESS	S			
CITY-ST-ZIP		☐ DELETE		7-ST-ZIP		Change	Addition	
TITLE		L_1 tyrrir	6.1 TITL		. •	ட பகரி	- YOUROH	
NAME			6.2 NAM		. 1			
STREET ADDRESS				EFT ADDRESS	5			
CITY-ST-ZIP			64 CIT	7-ST-ZIP	Continue (140 07/0%) Florido Cifluton I fur	iner earlifu that the		

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 informatio indicated on this annual report or suppliemental 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 trusted 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 in address.

(904) 388-5147