## 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 # H14260

(4)

THE PAVILION DEVELOPER, INC.

## FILED May 15 1998 8:00am Secretary of State

Addition

| Principal Place of Business 1301 RIVERPLACE BLVD. SUITE 1700 JACKSONVILLE 32 32207 |   | Mailing Address 1301 RIVERPLACE BLVD. SUITE 1700 JACKSONVILLE 32 32207                       |   | DO NOT WRITE IN THIS SPACE |                                |   |                             |                          |                             |
|--|---|--|---|----------------------------|--------------------------------|---|-----------------------------|--------------------------|-----------------------------|
| US   | ···· · ··   | US   |   |                            |                                | 3. Date Incorporated or Qualified   |                             |                          |                             |
| Principal Pi   | ace of Business   | 2a. Mailing Address  |   |                            |                                | 07/27/1984<br>4. FEI Number   |                             | 1 14.                    | pplied For                  |
|  |   | 26   |   |                            | 59-2757303                     |   | <del></del>                 | ot Applicable            |                             |
| Suite, Apt. #, etc.  |   | Suite, Apt. #, etc.  |   |                            | Certificate of Status Desired  |   | \$8.75                      | Additional equired       |                             |
| City & State   | )   | City & State   |   |                            | 6. Election Campaign Financing |   | \$5.00                      | May Be                   |                             |
| 3  |   |  |   |                            |                                | Trust Fund Contribution   |                             |                          | to Fees                     |
| Zip<br>4   | Country 25  | 25 29 30   |   | Pers                       |                                | This corporation owes or has pa     Personal Property Tax due June                | 30.                         | Yes [                    | tangible<br>No              |
|  | 9. Name and Address of Current  | Registered Agent   |   | 04                         | Nicon                          | 10. Name and Address of New Re  | gistered A                  | gent                     |                             |
|  | ANGER, HARVEY G.C.  |  | Į                                       | 81                         | Name                           |   |                             |                          |                             |
|  | )1 RIVERPLACE BLVD<br>ITE 1700  |  |   |                            |                                | ess (P.O. Box Number is Not Acceptable)   |                             |                          |                             |
|  | CK\$ONVILLE FL 32207  |  | ļ                                       | B3                         |                                |   |                             |                          |                             |
| •  |   |  | 84                                      |                            | City                           |   |                             | 85 Zip                   | Code                        |
| _  |   |  | j.                                      |                            | •                              |   | FL                          |                          | ]                           |
| 11. Pursuant to<br>office or re<br>agent. La                                       | to the previsions of Sections 607,0502<br>egistered agent, or both, in the State o<br>m familiar with, and accept the obligat | and 607.1508, Florida Statut<br>of Florida, Such change was<br>ions of, Section 607.0505, Fl | es, the ab<br>authorized<br>orida Statu | ove-r<br>I by tl<br>utes.  | named corpo<br>he corporation  | oration submits this statement for the poor's board of directors. I hereby accept | ourpose of o<br>of the appo | changing i<br>intment as | ts registered<br>registered |
| SIGNATURE  |   |  |   |                            |                                |   |                             |                          |                             |
|  | Signature, typed or profeed name of registered agent<br>OFTICERS AND  |  |   | Agent                      | signature require              | d when reinstating)  ADDITIONS/CHANGES TO OFFIC                                   | DATE<br>CEDS AND            | DIRECTO                  | Se IN 10                    |
| 12.<br>TITLE   | DV  | DELETE   | 13.                                     | LE                         |                                | ADDITIONS/CHANGES TO OFFIC  |                             | Change                   | Addition                    |
| NAME   | ROWE, ROBERT L. JR.   |  | 1.2 NAME                                |                            |                                |   |                             |                          |                             |
| STREET ADDRESS   | 9471 BAYMEADOWS RD  |  | 1.3 STF                                 | REET AC                    | DDRESS                         | ss  |                             |                          |                             |
| CITY-ST-ZIP  | JACKSONVILLE FL   |  | 1.4 CIT                                 | .4 CITY-ST-2IP             |                                |   |                             |                          |                             |
| IITLE  | DP DELETE   |  |   | 2.1 TITLE                  |                                |   |                             | Change                   | Addition                    |
| NAME   | MASON, WILLIAM C.   |  | 2 2 NAME                                |                            |                                |   |                             |                          | J                           |
| STREET ADDRESS   | 1301 RIVERPLACE BLVD., SUIT   | TE 1700  | 2.3 STF                                 | REET AS                    | DDRESS                         |   |                             |                          |                             |
| CITY-ST-ZIP  | JACKSONVILLE FL 32207   | T DELET  | 2. 4 CI                                 |                            | - ZIP                          |   |                             | 70                       | 110400-                     |
| TITLE  | DST<br>ODANIOED HADVEY  | T DETEIL   | DELETE 3.1 TIT                          |                            | - }                            |   | L                           | Change                   | Addition                    |
| NAME   | Granger, Harvey 1301 Riverplace Blvd., Suit   | TE 1700  | 3 2 NA1                                 |                            |                                |   |                             |                          |                             |
| STREET ADDRESS   | JACKSONVILLE FL 32207   | IE 1700  | •                                       |                            | DDRESS                         |   |                             |                          | ł                           |
| CITY-ST-ZIP  | AS  | DELETE   | 4.1 TiT                                 | IY-\$1-                    | - 711"                         |   |                             | Change                   | Addition                    |
| NAME   | JACKSON, REBECCA B.   | D orecti   | 4. 2 NA                                 |                            | ł                              |   |                             |                          | 7,00,,,,,,,                 |
| STREET ADDRESS   | 1301 RIVERPLACE BLVD., SUITE 1700   |  |   | 4.3 STREET ADDRESS         |                                |   |                             |                          |                             |
| DITY-ST-ZIP  | LACKSONNILLE EL SOSOT   |  |   | Y- \$T-                    | Ì                              |   |                             |                          | }                           |
| TITLE  |   | DELETE   | 5.1 TIT                                 |                            |                                |   |                             | Change                   | Addition                    |
| NAME   | PERRY, KENNETH C.   |  | 5.2 NA                                  | ME                         |                                |   |                             |                          |                             |
| STREET ADDRESS   | 1325 SAN MARCO BLVD., SUI   | TE 901   | 5 3 STF                                 | REET AC                    | DDRESS                         |   |                             |                          |                             |
| CITY-ST-ZIP  | JACKSONVILE FL  |  | 5.4 CH                                  | Y-ST-                      | ZIP                            |   |                             |                          | 1                           |

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 of an address.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-\$1-ZIP

DELETE

ICHATURE, KILLISAMO SELAM

GREENE, A. HUGH

JACKSONVILLE FL

**800 PRUDENTIAL DR** 

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

THE PAVILION DEVELOPER, INC.

V Thompson, Carol C. 1301 Riverplace Blvd., Suite 1700

Jacksonville, FL 32207