

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 # H16968
1. Corporation Name

(0)

COLONIAL IMPORTS, INC.

Principal Place of Business

350 S LAKE DESTINY DR
SUITE 200
ORLANDO FL 32810

Mailing Address

350 S LAKE DESTINY DR
SUITE 200
ORLANDO FL 32810

FILED

58 MAY -1 PM 2:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/13/1984

4. FEI Number

59-2441958

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

110 S.E. 6th Street

Suite, Apt. #, etc.

20th Floor

City & State

Ft. Lauderdale, FL

Zip

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9. Name and Address of Current Registered Agent

HUMPHRIES, J. GREGORY
20 N. ORANGE AVE.
SUITE 1000
ORLANDO FL 32801-4626

10. Name and Address of New Registered Agent

81 Name

CT Corporation System

82 Street Address (P.O. Box Number is Not Acceptable)

1200 S. Pine Island Road

83

84 City

Plantation

FL

85 Zip Code

33324

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 is approved 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 607.0502, Florida Statutes.

SIGNATURE

Connie Bryan

CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY

DATE

5/11/98

12. OFFICERS AND DIRECTORS

TITLE PD
NAME MEALEY, D.C.
STREET ADDRESS 350 S LAKE DESTINY DR200
CITY-ST-ZIP ORLANDO FL

TITLE STD
NAME PEACOCK, W.W.
STREET ADDRESS 350 S LAKE DESTINY DR200
CITY-ST-ZIP WINTER PARK FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME 400002515524--9
1.3 STREET ADDRESS -05/07/98--01081--013
1.4 CITY-ST-ZIP ****150.00 ****150.00

2.1 TITLE V
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE SD
3.2 NAME COLE, JAMES O.
3.3 STREET ADDRESS 110 S.E. 6th Street
3.4 CITY-ST-ZIP Ft. Lauderdale, FL 33301

4.1 TITLE T
4.2 NAME Hyle, Kathleen
4.3 STREET ADDRESS 110 S.E. 6th Street
4.4 CITY-ST-ZIP Ft. Lauderdale, FL 33301

5.1 TITLE D
5.2 NAME Hawkins, Thomas
5.3 STREET ADDRESS 110 S.E. 6th Street
5.4 CITY-ST-ZIP Ft. Lauderdale, FL 33301

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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

CR2E034 (10/97)