## 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

(0)

CATLIN INTERIORS, INC.

**FILED** Jan 28 1998 8:00am Secretary of State

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Principal Place of Business	Mailing Address	E EGOSALI AND INDER CIDIT LABOR AND LINK AND IT BEDIT			
916 DANTE PL STE 2 JACKSONVILLE FL 32207 US	916 DANTE PL STE 2 JACKSONVILLE FL 32207	DO NOT WRITE IN THIS SPACE			
	U\$	<ol> <li>Date Incorporated or Qualified</li> <li>09/18/1984</li> </ol>			
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For		
1	26	59-2446771	Not Applicab		
Suita Ant # alc	Cuito Ant # ata		A0 75		

\$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zıp Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CATLIN, HAROLD H. JAX CENTER 82 Street Address (P.O. Box Number is Not Acceptable) 76 S LAURA ST, STE 1703 JACKSONVILLE FL 32202 83 64 City

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

agent. I a	egistered agent, or both, in the State of Florida. Som In familiar with, and accept the obligations of, Sec	ion change was au tion 607.0505, Flori	thorized by the corpoi da Statutes.	ration's board of directors. I hereby accept t	he appointment as	registered
SIGNATURE	Signature, typed or printed name of registered agent and little if applied	able /M/YE	Registered Agent signature rec	outrad when reinstatives	DA2/	
12. OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICE	DATE RS AND DIRECTOR	S IN 12	
TITLE	डा	DELETE	1.1 TITLE		Change	Addition
NAME	Catlin, Harold H.		1.2 NAME		<b>-</b>	
STREET ADDRESS	76 S LAURA ST, STE 1703		1.3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-ST-ZIP			
TITLE	P	DELETE	2.1 TITLE		Change	☐ Addition
NAME	Catlin, Juliana M.		2.2 NAME			
STREET ADDRESS	918 DANTE PL STE 2		2.3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE		☐ Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-S1-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5 1 TITLE		☐ Change	Addition
NAME			52 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY+ST-ZIP			
TITLE		DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			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.