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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(9)

MASON, MIDDLEBROOK & SALLEY, INC.

Principal Place of Business

Mailing Address

FILED Jan 23 1998 8:00am Secretary of State



1138 EAST TENNESSEE STREET TALLAHASSEE FL 32308	1138 EAST TENNESSEE TALLAHASSEE FL 32308			DO NOT WRITE IN THE 3. Date Incorporated or Qualified 10/22/1984	IS SPACE	
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For	
21	26		59-2559399	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country 25	Zip Country 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
SALLEY, JOEL D.			31 Name			
1138 EAST TENNESSEE STREET		-	32 Street Add	ress (P.O. Box Number is Not Acceptable)		
TALLAHASSEE, 32308			3Leet Add	ass (F.O. Box Number is Not Acceptable)		
			33			
1			34 City	F		
Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State o agent. I am familiar with, and accept the obligations.	and 607.1508, Florida Statut f Florida. Such change was ons of, Section 607.0505, Fi	es, the ab authorized orlda Statu	ove-named corp by the corpora tes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered ppointment as registered	
SIGNATURE Signature, typed or printed name of registered agent	and title if applicable. (NOT	E. Registered	Agent signature regul	red when reinstating) DATE		_
12. OFFICERS AND		13.	<u> </u>	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12	6
TITLE P	DELETE 1.1 TI		E		Change Addition	CR2E034 (10/97)
NAME SALLEY, JOEL D	1.2 N		1E			¥
STREET ADDRESS 1509 CHOWKEEBIN NENE	1509 CHOWKEEBIN NENE 1.35		EET ADDRESS			Ü
CITY-ST-ZIP TALLAHASSEE FL.			Y-ST-ZIP			쏬
TITLE	DELETE 2.1 TI		E		Change	O
	MIDDLEBROOK, WILLIAM C 221					
	· · · · · · · · · · · · · · · · · ·		EET ADDRESS			
CITY-ST-ZIP TALLAHASSEE FL	DELETE	2.4 CITY DELETE 3.1 TITU			Change Addition	
NAME LISENBY, W. L	☐ <u> </u>	•	~		☐ Aligniño ☐ Voraigair	
NAME LISENBY, W. L STREET ADDRESS 2925 SHAMROCK SOUTH		3.2 NAI	EET ADDRESS			
TALLALIA COFF EL			Y-ST-ZIP			
CITY-ST-ZIP TALLAMASSEE FL	☐ DELETE	4,1 TIT			Change Addition	
NAME	_	4. 2 NA	ME			
STREET ADDRESS		4.3 STF	EET ADDRESS			
CITY - ST- ZIP		4.4 CIT	Y-ST-ZIP			
TITLE	DELETE 5.11				☐ Change ☐ Addition	
NAME		5.2 NAI	AE			
STREET ADDRESS		5.3 STF	EET ADDRESS			
CITY - ST - ZIP			Y-ST-ZIP			
TITLE	DELETE	6.1	E		Change Addition	
NAME		6.2 NAI				
STREET ADDRESS		6.3 ST	EET ADDRESS			
CITY-ST-ZIP						

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 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 a daddress.