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

**PROFIT** CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZiP



FLORIDA DEPARTMENT OF STATE

FILED

Jan 20 1998 8:00am

Secretary of State

CR2E034 (10/97

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H30191

(1)

SENTRY SERVICES INTERNATIONAL, INC. Principal Place of Business Mailing Address 720 EAST EAU GALLIE BLVD P O BOX 372416 INDIAN HARBOUR BCH FL 32937 SATELLITE BEACH FL 32937 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/15/1984 2, Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 59-2466742 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Bo 23 Trust Fund Contribution Added to Fees Zip Country 7ip Country This corporation owes or has paid the current year Intangible ΠNo 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LYNN, GEORGE A. 20 NAVAHO CIRCLE **B2** Street Address (P.O. Box Number is Not Acceptable) INDIAN HARBOR BEACH FL 32937 83 84 City Zip Code 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 was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or prioted name of trigestered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change THILF 1.1 TITLE NAME LYNN, GEORGE A. 1.2 NAME 20 NAVAHO CIRCLE STREET ADDRESS 1.3 STREET ADDRESS INDIAN HBR BCH FL 1.4 CITY - ST - ZIP CHY-ST-ZIF DELFTE Change Addition TITLE 2.1 11118 NAME LYNN, EDNA V. 2.2 NAME STREET ADDRESS 20 NAVAHO CIRCLE 2.3 STREET ADDRESS INDIAN HARBOUR BCH FL 2. 4 CITY - ST - ZIP CITY-ST-ZIF DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - S1 - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STHEET ADDRESS 4.4 CITY - \$1 - 7/P CITY-ST-ZIP DELETE Change Addition TITLE 51 THLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-2IP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutos. 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.

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP