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 #

H35473

(8)

GEORGE F. WHITE A.I.A. AND ASSOCIATES, INC.

Principal Place of Business Mailing Address \$455 N. FEDERAL HWY.. #F 5455 N. FEDERAL HWY., #F **BOCA RATON FL 33487 BOCA RATON FL 33487** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/19/1984 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 26 59-2478678 Suite Ant # etc. Suite. Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent WHITE, GEORGE F. 5455 NORTH FEDERAL HWY. SUITE F Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33487 B3** 84 City 85 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. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition TITLE PD 1 1 TITLE Change WHITE, GEORGE F. NAME 1.2 NAME 5455 N FEDERAL HWY. STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL** 1.4 CITY-ST-ZIP DELETE TITLE Change Addition 2.1 TITLE STD CONFORTI, JAMES NAME 2.2 NAME 5455 N FEDERAL HWY. STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-\$1-2IP DELETE Addition TITLE 5.1 TITLE

14. Thereby 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 suppliemental and all 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 fusice 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 or an attraction with an address.

5.2 NAME

61 TITLE

62 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

54 CITY-ST-ZIP

CIONATURE.

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CR2E034 (10/9)

peonce Fluthible 30-90 5-61-907-119

Change

Addition

FILED

Feb 09 1998 8:00am

Secretary of State