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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Apr 24 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

500 NO WESTSHORE BLVD

TAMPA FL 33609

H66094

(4)

500 NO WESTSHORE BLVD

Mailing Address

**TAMPA FL 33609** 

FIRST SOUTHEASTERN CAPITAL ADVISERS, INCORPORATE

2. Principal Fleed of Desiross   2. Mining Address   3. Mining Address   4. FET Number   Applied For Status Desired   Applied For Status Desired   Status Des								07/11/1985			
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9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Name and Address of New Registered Agent  82 Street Address of New Registered Agent  11. Parasiant to the provisions of Sections 607-0267 and 607, 1508. Favried Statutes. The above registered agent on both, in the Sale of Fooda, Such change was authorised by the curporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505. Florida Statutes.  SIGNATURE  12. OFFICE AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  11. Parasiant to the provisions of sections of sections of, Section 607 0505. Florida Statutes.  SIGNATURE  12. OFFICE AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  11. Parasiant to the provisions of sections of sections of sections 607 0505. Florida Statutes.  SIGNATURE  12. OFFICE AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. In the section of sections of section								Trust Fund Contribution			
REYNOLDS, CRAIG W. SON OW SETSHORE BLVD STE 820 TAMPA FL 33809  44 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submills this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation submills this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation submills this statement for the purpose of changing its registere agent. I am farmiser with, non-ecocynt the obligations of, Section 607.6505, Florida Statutes.  SIGNATURE  SIGNATURE  STD  REYNOLDS, CRAIG W  SIRET ADDRESS  12. DEFECT RIS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  12. TITLE  STD  REYNOLDS, CRAIG W  SON OW WESTSHORE BLVD, STE 820  TAMPA FL  DELETE  1 ITHE  1 ADDRESS  1 SIRET ADDRESS	Zip	Country	Zip	Zip Co						angible	
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NETROLIDS, CARAGE WY  SON OW WESTSHORE BLVD  STE 820 TAMPA FL 33009  82  Street Address (P.O. Box Number is Not Acceptable)  83  64  City FL 85 Zip Code  65  66  67  69  69  60  60  60  60  60  60  60  60	g, Name and Address of Current Registered Agent							10. Name and Address of New Registered Aç	gent		
STO NO WESTSHORE BLVD STE 820 TAMPA FL 33609  11. Pursuant to the provisions of Sections 607 00.02 and 607.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registere agent. I am familiar with, and accept the displacions of Section 607 0505. Florids Statutes agent I am familiar with, and accept the displacions of Section 607 0505. Florids Statutes SIGNATURE  SIGNATURE  OFFICE RS AND DIFFECTORS  12. OFFICE RS AND DIFFECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12  TILE  STD  REYNOLDS, CRAIG W  SIRRET ADDRESS  OTIV-ST-ZP  TILE  PD  DELETE  1.1 SITTLE  PD  DELETE  2.1 ITILE  PD  Addit  ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12  LACITY-ST-ZP  LACITY-ST-ZP  TILE  PD  ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12  LACITY-ST-ZP  ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12  LACITY-ST-ZP  TILE  PD  ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12  LACITY-ST-ZP  TILE  PD  ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12  LACITY-ST-ZP  ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12  LACITY-ST-ZP  TILE  PD  ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12  LACITY-ST-ZP  ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12  LACITY-ST-ZP  TILE  DELETE  2.1 ITILE  DELETE  2.1 ITILE  DELETE  3.1 ITILE  DELET	REYNOLDS, CRAIG W.						Name				
STE 820 TAMPA FL 33809  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0002 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its 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, 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, 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, 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, or both in the State of Florida. Such change was authorized by the corporation's board of directors. In tereby accept the appointment as registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. In the appointment as registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. In hereby accept the appointment as registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. In hereby accept the appointment as registered agent, or both in the state of the purpose of change was authorized by the corporation's board of directors. In hereby accept the appointment as registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. In hereby accept the appointment as registered.  12. The Both in the purpose of change was authorized by the corporation's board of directors. In hereby accept the appointment as registered.  13. The Both in the State of Florida. Such change was authorized by the corporation's board of directors. In hereby accept the purpose of Chan						82 Street Address (P.O. Box Number is Not Acceptable)					
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Signature, lyard or present annew of registered larger and tack if largic-leading (NOTE: Registered Appart signature required when reinstating)   DATE				2 . 301.2000, 710	Cialato						
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64 CITY-ST-ZIP 64 CIT		artify that the information cumpling w	th this filling do	se not qualify for	the exemp	31- alic	on stated in C	action 119 07(3)(i) Florida Statutas I further acres	tu that the	information	
indicated on this annual report or supplied entitle 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	indicated i	on this annual report or <u>supplem</u> enta	arans ning oc Lannual report	હંક riot quality 10! .is true and accu	rate exemp	hat	on stated iff St I my signature	shall have the same legal effect as if made unde	ry mat me er oath; tha	at Lam an	
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 supplicated at a signature shall have the same legal effect as if made under path; that I am an officer or director of the composition 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 change it in program and chimelit with an address.	officer or of Block 12 o	director of the corporation of the hoce or Block 13 it changed lockor as attack	iiver or trustee thment with an	empowered to e address	xecute this	re	eport as requir	ed by Chapter 607, Florida Statutes; and that my	name ap	pears in	