

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

FILED

Apr 17 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H86296 (1)
1. Corporation Name
NED E. J. WEBSTER, INC.

Principal Place of Business
S.E. FLORIDA
PEMBROKE PINES FL 33084

Mailing Address
P.O. BOX 8883
PEMBROKE PINES FL 33084



2. Principal Place of Business 21 SOUTH FLORIDA Suite, Apt. #, etc. 22 3767 POMEROY DR., SE City & State 23 ST. PETERSBURG, FL Zip 24 33705		2a. Mailing Address 26 P.O. BOX 54824 Suite, Apt. #, etc. 27 City & State 28 ST. PETERSBURG, FL Zip 29 33739		3. Date Incorporated or Qualified 11/18/1985		3a. Date of Last Report 01/24/1996	
Country 25 PINELLAS		Country 30 PINELLAS		4. FEI Number 59-2628154		Applied For Not Applicable	
p. Name and Address of Current Registered Agent WEBSTER, NED E.J. 200 TREASURE HARBOR ROAD TAVERNIER FL 33070		10. Name and Address of New Registered Agent		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No ?			

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
			FL	

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WEBSTER, NED E.J. P.O. BOX 853 N/A TAVERNIER FL 33070	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PD WEBSTER, NED E.J. P.O. BOX 54824 ST. PETERSBURG, FL 33739
TITLE NAME STREET ADDRESS CITY-ST-ZIP		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

Is this what you want?
Re: letter of 2/11/97. NEDW.

14. I do 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 to this report.

SIGNATURE: *Ned E. Webster* January 30, 1997 822-7185

CR2E034 (9/96)