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PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H99861

(7)

WANDA & JESSE ARNOLD, INC.

Mailing Address

8205 S.E. VENUS ST. <u>SOUND FL 3</u>3475

Principal Place of Business

BOX 594

FILED

May 06 1998 8:00am

Secretary of State

114-27-98

HOBE SOUND FL 33475 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/18/1986 2. Principal Place of Business 4. FEI Number Applied For Hobe. <u> Soun</u> Not Applicable 59-2636306 \$8.75 Additional 5. Certificate of Status Desired S. E. Venus Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution П Added to Fees 23 8. This corporation owes or has paid the current year Intangible 29 33 4 Personal Property Tax due June 30. 🔀 Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name BASS, DONALD L. 7166 S.E. OSPREY ST. Street Address (P.O. Box Number is Not Acceptable) 82 **HOBE SOUND FL 33455** 83 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed transcriblined stored agent and the Lappheable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12, OFFICERS AND DIRLCTORS 13. DELETE Change Addition TITLE 1.1 TITLE **ARNOLD, WANDA L.** NAME 1.2 NAME 9205 SE VENUS STREET ADORESS 1.3 STREET ADDRESS **HOBE SOUND FL** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE **ARNOLD, JESSE** NAME 2.2 NAME 9205 SE VENUS STREET ADDRESS 2.3 STREET ADDRESS HOBE SOUND FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY - ST - ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST-ZIP CITY-ST-ZIP 14. I 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 with an address.