

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

FILED  
Apr 16 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northrup Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J08492 (7)  
1. Corporation Name  
ANDREWS COIN LAUNDRY & POOL GAMES, INC.

Principal Place of Business

% JOHN F. ANDREWS  
1531 JACKSON BLUFF RD.  
TALLAHASSEE FL 32304

Mailing Address

% JOHN F. ANDREWS  
1531 JACKSON BLUFF RD.  
TALLAHASSEE FL 32304



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 ANDREWS Coin Laundry
22 City & State	27 RT 1 Box 26
23 Zip	28 Quincy Florida
24 Country	29 32351
25	30

3. Date Incorporated or Qualified	4. FEI Number	Applied For
04/10/1986	59-2669959	Not Applicable
5. Certificate of Status Desired	6. Election Campaign Financing	8. This corporation owes or has paid the current year Intangible
\$8.75 Additional Fee Required	Trust Fund Contribution <input type="checkbox"/>	Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No
\$5.00 May Be Added to Fees		

9. Name and Address of Current Registered Agent
JOHNSON, GILBERT C 1531 JACKSON BLUFF RD. TALLAHASSEE FL 32304

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
GILBERT C. JOHNSON RT 1 Box 26 Quincy FL 32351

11. Pursuant to the provisions of Sections 607.0502 and 607.1601, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I, the Secretary of State of Florida, have authorized by the corporate seal and the signature of the registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Michael S. Johnson* (VPS) DATE: 3-18-98

12. OFFICERS AND DIRECTORS	
TITLE	VPS
NAME	JOHNSON, MICHAEL S.
STREET ADDRESS	1531 JACKSON BLUFF RD.
CITY - ST - ZIP	TALLAHASSEE FL
TITLE	P
NAME	JOHNSON, GILBERT
STREET ADDRESS	1531 JACKSON BLUFF RD
CITY - ST - ZIP	TALLAHASSEE FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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.

SIGNATURE: *Michael S. Johnson* 3-18-98 850-575-8833

CR2E034 (10/97)