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 #

(6)

FILED Feb 09 1998 8:00am Secretary of State

H. A. YEARGIN & ASSOCIATES, P.A.					
		•		E IAA IIIA AIII DIRII ARAA IIIA ARAA HII ARAII	NA N BIGIN ANDIN ANDIN BIRIN MADA
Principal Plac	e of Business	Mailing Address			LIDAN MADAY DIDIN DIDIN DIDIN NODI
707 MILL CREEK RD. 707 MILL CREEK RD.					
STE. 400 STE. 400				DO NOT WRITE IN TH	IIC CDACE
JACKSONVILLE FL 32211 JACKSONVILLE FL 32211 US US				3. Date Incorporated or Qualified	IIS SPACE
"		•		12/01/1986	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2748264	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desireti	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23	Country	28	Onestee	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25 g. Name and Address of Current		0	Personal Property Tax due June 30. 10. Name and Address of New Register	Yes No
YE	ARGIN, H. A.		81 Name	10.	
707 MILL CREEK DO					
STE. 400			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
	CKSONVILLE FL 32211		83		
	· · · · · · · · · · · · · · · · · · ·		94 654		SE Zin Codo
			84 City	F	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	H.A. YEARGIM	5V7 -1	14×1	Ke and Garage	2-2-58
	Signature typed or printed name of registered agent		Registered Agent signal rein	o urired when reinstading) (74.1)	
TITLE	OFFICERS AND	DELETÉ	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	YEARGIN, H.A., JR.	_ section	1.2 NAME		
STREET ADDRESS	707 MILL CREEK RD #300		1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-ST-ZIP		
TITLE	VPD	DELETE	2 1 HILE		Change Addition
NAME	YEARGIN, DAVID W.		2.2 NAME		
STREET ADDRESS	707 MILL CREEK RD., #400		2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 CITY - ST - ZIP		
TITLE	PD	☐ DELETE	3.1 TITLE		Change Addition
NAME	YEARGIN, ALICE A.		3.2 NAME		
STREET ADDRESS	707 MILLCREEK RD., #400		3.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL	T priese	3.4. CITY-ST-ZIP		
TITLE	SVPD VEADOIN HE C	☐ DELET e	4.1 TITLE	111	Change Addition
NAME	YEARGIN, H.F. S		4. 2 NAME	YEARgIN H.A.SR.	
STREET ADDRESS	707 MILL CREEK RD., #400 JACKSONVILLE FL			. 0	
CITY-ST-ZIP TITLE	ST ST	DELETE	4.4 CITY - ST - ZIP		Change Addition
NAME	HEAD, DONNA L.		5.1 TITLE		CT Analide CT Modillott
STREET ADDRESS	707 MILL CREEK RD., #400		5.2 NAME		
City-\$t-zip	JACKSONVILLE FL		5 3 STREET ADDRESS 5 4 City-St-Zip		
TITLE	WEIGHT WITTINGS IN	DELETE	61 THILE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 City-ST-ZiP		
		2. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4.		C 0 C 440 03(0H) 51 (1 0) (1 1 H	

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 of 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 man attachment with an address.