## 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 # J56459

(7)

MEEKS, ROSS PAULK & ASSOCIATES, P.A.

## **FILED** Apr 24 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address |  |   |   | ***                        | ı nasının dini diike anlır basdı dilin dibil bidis bibil dibil dibil dibil bisil kabı                     |                         |
|---|--|---|---|----------------------------|---|-------------------------|
| 1300 RIVERPLACE BLVD 1300 RIVERPLACE BLVD   |  |   |   |                            |   |                         |
| SUITE 300<br>JACKSONVILLE FL 32207          |  | SUITE 300   |   |                            |   |                         |
|   |  | JACKSONVILLE FL 32207   |   | DO NOT WRITE IN THIS SPACE |   |                         |
| US  |  | U\$   |   |                            | Date Incorporated or Qualified 02/11/1987   |                         |
| <u> </u>                                    | lace of Business   | 2a, Mailing Address   |   |                            | 4. FEI Number   | Applied For             |
| 21  |  | 26  |   |                            | 59-2759983  | Not Applicable          |
| Suite, Apt                                  | #, etc.  | Suite, Apt. #, etc.   | *** *** . ******                          |                            |   | \$8.75 Additional       |
| 22  |  | 27  |   |                            | 5. Certificate of Status Desired  | Fee Required            |
| City & State                                |  | City & State  | City & State                              |                            | 6. Election Campaign Financing  | \$5.00 May Be           |
| 23  |  | 28  |   |                            | Trust Fund Contribution   | Added to Fees           |
| Zip   | Country  | Ζιρ   | Countr                                    | y                          | 8. This corporation owes or has paid the cu   | rent year Intangible    |
| 24  | 25   |   | 30  |                            | Personal Property Tax due June 30.  | Yes No                  |
|   | g. Name and Address of Curre   | ent Registered Agent  |   |                            | <ol><li>Name and Address of New Registered</li></ol>  | Agent                   |
| MEEKS, JACK                                 |  |   | 81  | Name                       |   |                         |
| 1300 RIVERPLACE BLVD                        |  |   | 82  | Street Add                 | dress (P.O. Box Number is Not Acceptable)   |                         |
| SU.   | NTE 300  |   | 02  | Siree: Au                  | dress (F.O. Dox Nortiber is Not Acceptable)   |                         |
| JACKSONVILLE FL 32207                       |  |   | 83  |                            |   |                         |
|   |  |   | 84  | City                       |   | 85 Zip Code             |
| 44 Purcuant                                 | to the provisions of Sections 607 86   | 02 and 607 1509 Elorida Statuto   |   | l nomad an                 | FL  | ( )                     |
| office or r<br>agent. La                    | registered agent, or both, in the Stat<br>m familiar with, and accept the obli | te of Florida. Such change was au<br>gations of, Section 607.0505, Flor | s, the abov<br>hthorized b<br>ida Statute | y the corpora<br>s.        | rporation submits this statement for the purpose o<br>ation's board of directors. I hereby accept the app | ocintment as registered |
| SIGNATURE                                   | Signature typed or publish name of registered a                                | cont and title if anytic able (NOTE:                                    | Forestered An                             | ent sionaliza reci         | uired when reinstating) DATE  |                         |
| 12.   |  | ND DIRECTORS  | 13.                                       | on biginatoro requ         | ADDITIONS/CHANGES TO OFFICERS AND   | DIRECTORS IN 12         |
| TITLE                                       | D  | ☐ DELETE  | 1.1 TITLE                                 |                            | ADDITIONS/OFFRINGES TO OFFICERS AND   | Change Addition         |
| NAME  | MEEKS, JACK  | _   | 1.2 NAME                                  |                            |   |                         |
| STREET ADDRESS                              | 1300 RIVERPLACE BLVD., S   | UITE 300  |   | F ADDRESS                  |   |                         |
| CITY-ST-ZIP                                 | JACKSONVILLE FL  |   |   |                            |   |                         |
| TITLE                                       | V  | DELETE  | 1.4 CITY - 1<br>2.1 TITLE                 | 51-ZIP                     |   | Change Addition         |
| NAME  | ROSS, BRENT  |   | 22 NAME                                   | 1                          |   | C Custific C Vitation:  |
| STREET ADDRESS                              | 1300 RIVERPLACE BLVD., S   | TF 300  |   |                            |   |                         |
| 1   | JACKSONVILLE FL  | 71C. 000  | 2.3 STREET                                |                            |   |                         |
| CITY-ST-ZIP                                 | T  | DELETE  | 2 4 C/TY-                                 | ST-ZIP                     |   |                         |
| TITLE                                       | WOOSLEY, CARYL   | T'I nerete  | 3 1 TITLE                                 |                            |   | ☐ Change ☐ Addition     |
| NAME  | 1300 RIVERPLACE BLVD., S   | TE 200  | 32 NAME                                   |                            |   |                         |
| STREET ADDRESS                              |  | 11C. 300  | 3 3 STREET                                |                            |   |                         |
| CITY-ST-ZIP                                 | JACKSONMLLE FL   |   | 3.4. CITY-                                | ST-ZIP                     |   |                         |
| TITLE                                       | V WALLED ALLOANS   | DELETE  | 4.1 TITLE                                 | [                          |   | ☐ Change ☐ Addition     |
| NAME  | WALLER, SUSAN R.   |   | 4. 2 NAME                                 | }                          |   |                         |
| STREET ADDRESS                              | 1300 RIVERPLACE BLVD., S   | TE. 300   | 4.3 STREET                                | ADDRESS                    |   |                         |
| CITY-ST-ZIP                                 | JACKSONVILLE FL  |   | 4.4 CITY - 9                              | ST-ZIP                     |   |                         |
| TITLE                                       |  | ☐ DELETE  | 5.1 TITLE                                 | 1                          |   | Change Addition         |
| NAME  |  |   | 5.2 NAME                                  |                            |   |                         |
| STREET ADDRESS                              |  |   | 5.3 STREET                                | ADDRESS                    |   |                         |
| CITY-ST-ZIP                                 |  |   | 5.4 CITY - 9                              |                            |   |                         |
| TITLE                                       |  | ☐ DELETE  | 6.1 TITLE                                 | .,                         |   | Change Addition         |
| NAME  |  |   | 6.2 NAME                                  |                            |   |                         |
| STREET ADDRESS                              |  |   | 6.3 STREET                                | ADDDCCC                    | •,  |                         |
| CITY ST 710                                 |  |   | D.3 STREET                                |                            |   |                         |

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 14 if changed, or on an attachment with an address