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

**PROFIT** CORPORATION ANNUAL REPORT 1998 DOCUMENT # BLAKER INVESTMENT COMPANY

WINTER PARK FL 32789

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(9)

## 

**FILED** 

Apr 24 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address 222 W COMSTOCK AVE SUITE 210

PO BOX 2146 WINTER PARK FL 32790

DO NOT WRITE IN THIS SPACE

US								3. Date Incorporated or Qualified						
									03/23/1987					
2. Principal Pl	ace of Busine	988		20.	Mailing Address				4. FEI Number		A	oplied For		
21 222	222 W. COMSTOCK AVE 28 P.O. Box 2								59-2777078		N	ot Applicable		
Suite Apt. #, etc. Suite, Apt. #, etc. 22 JUITE 200 27									5. Certificate of Status	s Desired		Additional equired		
	City & State City & State								6. Election Campaign	Financing	\$5.00	May Be		
23 WINT	BR PA	<b>IRK</b>	FL	28	WINTER	ARK	· •	FL	Trust Fund Contrib	ution [	Added	to Fees		
Zip	. <b>_</b> L	Country	_		Žiρ	Cou		_	8. This corporation or	ves or has paid t				
24 3278								<u> </u>	Personal Property Tax due June 30. Yes X No					
9. Name and Address of Current Registered Agent									10. Name and Address of New Registered Agent					
PUOLE, MICHAEL W.									NE. MICE	HAFI 1	.1.			
222 W COMSTOCK AVE									ess (P.O. Box Number is	Not Acceptable)	A			
SUITE 210									222 W. CONSTOCK AVE					
WINTER PARK FL 32789									UTG 100					
									116 200		85 Zip	Code		
								City		K.	FL    32	.787		
11. Pursuant t	o the provision	ons of Secti	ons 607.0502	and 6	07.1508, Florida Statute	es, the al	ove	named	oration submits this state	ment for the purp	pose of changing	ts registered		
office or re	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.													
	11 1011111057 1111	.,	, and obligan		.,,									
SIGNATURE	Signature typed o	or printed name	of registered agent	and the	e if applicable (NOTE	Registere	1 Ager	it signature	ed when reinstating)		DATE			
12.		OF	FICERS AND	DIRE	CTORS	13.			ADDITIONS/CHANG	SES TO OFFICER				
TITLE	D				DELETE	1.170	LE		P	•	Change	Addition		
NAME	POOLE, MICHAEL W. 12								COLE, MICHAELZ W. COMET	EL W				
STREET ADDRESS	AND W CONSTROL AND CHEET AND							ADDRESS	lz W. Comst	ock Ave	, suite a	00		
CITY-ST-ZIP	WINTER					1.4 €	TY-\$1	- ZIP	INTER PARK	FL 32	789			
TITLE					DELETE	2.1 TI	LE				☐ Change	Addition A		
NAME						22 N	ME		REDNE, NICHOL	AS JR		D.A.		
STREET AODRESS	23						23 STREET ADDRESS 23		CARBONE, NICHOLAS, JR 222 W. CONSTOCK AVE, SUITE 200					
CITY-ST-ZIP						2 4 0			INTER PAR	K. FL 3	12789			
TITLE					DELETE	311			101120		☐ Change	Addition		
NAME						32 N	ME							
STREET ADDRESS						335	REET	ADDRESS						
CITY-ST-ZIP						3.4. 0								
TITLE					DELETE	4.1 (					☐ Change	Addition		
NAME					_	4 2 1	AME							
STREET ADDRESS								ADDRESS						
							TY-\$1							
CITY-ST-ZIP TITLE					DELETE	5.1 (		-4.11			Change	Addition		
NAME						5.2 N								
						1		ADDRESS						
STREET ADDRESS						5.4 C		l l						
CITY-ST-2IP					DELETE	6.1 T		- 417			Change	Addition		
TITLE						62 N					— · - •			
NAME								*DODECC						
STREET ADDRESS								ADDRESS						
CITY-ST-ZIP				b. Ab. S	filing doop not profit.	6.4 C	IY-S	-ZIP	Section 119.07(3)(i), Flor	ida Statutes I fu	rther certify that th	e information		
i 14. Thereby (	ceruty inat the	e informatio	n subbilea Wil	amı i	ming does not quality to	JI THE OX	si npi	1011 Stdl6	accion matria, no	iua Sialules. I lui	caror corning a lead of	C sales in all of the		

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 other 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 this all all an an address. 17/92