## 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

## **FILED** Mar 16 1998 8:00am Secretary of State

DOCUI 1. Corporation CAMPB	n Mame		4873 Oncrete (	COMPAN	(9) <sub>Y</sub>							
Principal Place of Business				Mailing Address					- * ###### ############################	) II <b>WIWII WIWI</b> I	) <b>Bib</b> il Alaki	#1911 F##1
830 CAMPBELL ROAD				930 CAMPBELL ROAD								
CENTURY FL	32535			CENTURY	FL 32535				DO NOT WRITE IN	THIS SPA	CE	
									3. Date Incorporated or Qualified	111100171		
									03/27/1987			
2. Principal Place of Business				2a. Mailing Address					4. FEI Number		Ap	plied For
21				26					<u>59-2783488</u>		No	t Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired	ר ר <b>ז</b>	8.75	
22				27							Fee Re	<del></del>
City & State				City & State					6. Election Campaign Financing		\$5.00	
<b>23</b> Zip					Zip Country				Trust Fund Contribution		Added t	
24		25	١	<b>─</b> `		30	•		<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>			angible i No
24 25 29 30  9. Name and Address of Current Registered Agent						130			10. Name and Address of New Regist			<u> </u>
CAI	MPBELL, JA	AMES		<u>-</u>	<del></del> -	81	Name					
930 CAMPBELL ROAD						82	Stroot	Addro	ss (P.O. Box Number is Not Acceptable)			
CENTURY FL 32535				82 Street Addi			Addres	ss (F.O. Box Number is 140t Acceptable)				
						83						
	•					84	City		· · · · · · · · · · · · · · · · · · ·		5 Zip C	` <u>ad</u> a
						104	City			FL  °	15   Zip C	Joue
office or re	egistered ag	ient, or both, i	ns 607,0502 and the State of Float the obligation	lorida. Such	i change was	authorized b	y the cor	corpo poratio	ration submits this statement for the purp n's board of directors. I hereby accept th	ose of cha e appoint	anging its ment as	registered registered
SIGNATURE			_									
	Signature, typed		registered agent and		e. (NO	TE: Registered Ag	ent signaturi	e required		DATE	DEOTOD	00110
12.	DP	UFF	ICERS AND DI	RECTORS	DELETE	13.		ववा	ADDITIONS/CHANGES TO OFFICERS		Change	Addition
NAME		ELL, JAMES	E.		_ DEECTE	1.2 NAME		Cac	nobell, James E.	LESS.	Contraction	
	REET ADDRESS 720 CAMPBELL ROAD				1.3 STREET ADDRES			736	o campbell Road			
CITY-ST-ZIP	CENTUR		_			1.4 CITY-S		(0.	ntury IFC 38535			ı
TITLE					DELETE	2.1 TITLE	1 - ZIF		11414 116 84868		Change	Addition
NAME						2.2 NAME				_	•	_
STREET ADDRESS						2.3 STREET	ADDRESS					
CITY-ST-ZIP						2. 4 CITY-	ST-ZIP					
TITLE					DELETE	3.1 TITLE					Change	Addition
NAME						3.2 NAME		ł				1
STREET ADDRESS						3.3 STREET	ADDRESS					
CITY-ST-ZIP						3.4. CITY-	ST-ZIP	l				
TITLE					DELETE	4.1 TITLE					Change	Addition
NAME						4. 2 NAME						Į.
STREET ADDRESS						4.3 STREET	ADDRESS					
CITY-ST-ZIP						4.4 CITY-S	T-ZIP					
TITLE					DELETE	5.1 TITLE				Ш	Change	☐ Addition
NAME						5.2 NAME						
STREET ADDRESS						5.3 STREET	ADDRESS					
CITY-ST-ZIP					December 1	5,4 CITY - S	T-21P	1	,	·····	0)	7-1
TITLE				į	DELETE	6.1 TITLE				Ц	Change	☐ Addition
NAME						6.2 NAME						
STREET ADDRESS						6.3 STREET						
CITY-ST-ZIP						6.4 CITY - S	T-ZIP	L				

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 chapted, or on an attachment with an address.