SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

97 JUL 18 MM 9: 35

DOCUMENT # J811 THE ROGERS APPRAISAL GRO	(' ' '		SEGRE TALL AH	TARY OF STATE ASSEE FLORIDA
Principal Place of Business	Mailing Address			
3581 CARDINAL POINT DR.	3581 CARDINAL POINT	NR		
JACKSONVILLE FL 32257	JACKSONVILLE FL 3225			
				E IN THIS SPACE
			3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address		07/01/1987 4. FEI Number	1 01/26/1996 Applied For
21	26		59-2829420	Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.			\$0.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has p	aid the current year Intangible
25	29	30	Personal Property Tax due June	
9, Name and Address of Co	urrent Registered Agent	81 Name	10. Name and Address of New Ro	egistered Agent
ROGERS, CHARLES B.		81 Name		
9627 WEXFORD RD.		82 Street Add	ress (P.O. Box Number is Not Accepta	ble)
JACKSONVILLE FL 32257		83		
		83		
•		84 City		FL 85 Zip Code
Pursuant to the provisions of Sections 607 office or registered agent, or both, in the sagent. I am familiar with, and accept the costs SIGNATURE	State of Florida. Such change was obligations of, Section 607.0505, Fl	authorized by the corporal lorida Statutes.	ion's board of directors. I hereby acce	purpose of changing its registered pt the appointment as registered
Signature, typed or prioted name of register		ft : Registered Agent signature requi		DATE
12. OFFICERS	S AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFI	D 050000 1 14200-
NAME ROGERS, CHARLES B.	Detele	1.1 TITLE	1000022	2471316 9701107023 5.00 ****165.00
STREET ADDRESS 9627 WEXFORD RD.		1.2 NAME	-07/247	9701107023
MANAGEMENT CO. AAACC	,	13 STREET ADDRESS	www.16	5.00 ****165.00
TITLE JACKSUNVILLE FL 3225/	DELETE	14 CITY-ST-ZIP 21 TITLE		Change Addition
NAME		2 2 NAME		E Shango E Madrion
STREET ADDRESS		2 3 STREET ADDRESS		
CITY-SI-ZIP		2 4 City-St-ZiP		
TITLE	DELETE	3 1 TITLE		Change Addition
NAME	- ·	3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY - ST - ZIP		3.4. CITY - ST - ZIP		
TITLE	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - ST - ZIP		
TIFLE	DELETE	5.1 TITLE		Change Addition
NAME .		5.2 NAME		
STREET ADORES		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY+ST-ZIP		
TITLE	DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP	A	6.4 CITY-ST-ZIP		
I do hereby certify that the information sur- information indicated on this armuse ropid I am an officer or director of the opporation appears in Block 12 or Block 13/II change				





3581 Cardinal Point Drive • Jacksonville, Florida 32257 • (904) 733-8346 • (FAX) 731-9402

July 15, 1997

Division of Corporations Annual Reports Section Post Office Box 1500 Tallahassee, Florida 32302-1500

RE: Profit Corporation Annual Report

Dear Sir/Madam:

Enclosed is my replacement check which I understand was destroyed in January, 1997 during processing by the State. My original check was #9240 dated 01/03/97 for \$165.00. I further understand that I will not be charged a late fee.

Sincerely,

Charles B. Rogers, MAI,SRA

State-Certified General Real Estate Appraiser

RZ 0000113

CBR/rlb