

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

FILED

Jun 30 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # J91131 (9)  
1. Corporation Name  
JIM WALTER CORPORATION

Principal Place of Business  
4010 BOY SCOUT BLVD  
P.O. BOX 31075  
TAMPA FL 33631-0075

Mailing Address  
4010 BOY SCOUT BLVD  
P.O. BOX 31075  
TAMPA FL 33631-0075



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/08/1987

4. FEI Number

59-2888029

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Signature, typed, printed name of registered agent and title if applicable

(NOTE - Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME JOHNSEY, WALTER F.  
STREET ADDRESS 100 BEACON PARKWAY WEST  
CITY-ST-ZIP BIRMINGHAM AL

TITLE ☒ DELETE

NAME LONG, WILLIAM B.  
STREET ADDRESS 100 BEACON PARKWAY WEST  
CITY-ST-ZIP BIRMINGHAM AL

TITLE ☒ DELETE

NAME KRIEVER, R. BLAIR  
STREET ADDRESS 4010 BOY SCOUT BLVD.  
CITY-ST-ZIP TAMPA FL

TITLE ☒ DELETE

NAME WYNE, ANCIL E.  
STREET ADDRESS 4010 BOY SCOUT BLVD.  
CITY-ST-ZIP TAMPA FL

TITLE ☒ DELETE

NAME ROBINSON, CHARLES E.  
STREET ADDRESS 4010 BOY SCOUT BLVD.  
CITY-ST-ZIP TAMPA FL

TITLE ☒ DELETE

NAME DELILLO, MARK A  
STREET ADDRESS 4010 BOY SCOUT BLVD  
CITY-ST-ZIP TAMPA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

1.1 TITLE D/P/T/S  
1.2 NAME Stevens, James W.  
1.3 STREET ADDRESS 450 Park Ave., Sixth FL.  
1.4 CITY-ST-ZIP New York, NY 10022

2.1 TITLE AS ☐ Change ☒ Addition

2.2 NAME Irwin, Kevin E.  
2.3 STREET ADDRESS 1800 Provident Tower, One E. 4th St.  
2.4 CITY-ST-ZIP Cincinnati, OH 45202

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 changed, or on an attachment with an address.

SIGNATURE

CR2E034 (10/97)