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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

ANNUAL REPORT  1998			Secretary of State  DIVISION OF CORPORATIONS			Secretary of State	
DOCUI	MENT	• '	03862 CORP.	(5)			
Principal Plac	e of Business	1		Mailing Address			T TOE HOUR ON DOING THAN SHIND SHIND SHOULD BE ON DIGHT SIGHT SHOW SHOW SHOW SHOW
% W. STEWART CLAGUE				% W. STEWART CLAGUE			
800 20TH PLACE. SUITE 6 VERO BEACH FL 32960-5391				800 20TH PLACE. SUITE 6 VERO BEACH FL 32980-5391			DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
2. Principal P	lace of Busine	988		2a. Mailing Address			11/20/1987 4. FEI Number Applied For
21				26			65-0012526 Not Applicable
Suite, Apt.	#, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Regulred
City & State	<u>e</u>	· · · · · · · · · · · · · · · · · · ·		City & State			6. Election Campaign Financing \$5.00 May Be
23				28			Trust Fund Contribution Added to Fees
Zip 24		Countr 25	· -	Zip <b>29</b>	30 Coun	try	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No
			ss of Current Re				10. Name and Address of New Registered Agent
	AGUE, W. S		Ī			Name	1 <del>e</del>
800 20TH PLACE SUITE 6 VERO BEACH FL 32962						Street /	et Address (P.O. Box Number is Not Acceptable)
						B3	
			-		<u> </u>	34 City	<b>■■ 85</b> Zip Code
							<b>FL</b>  **
office or r	egistered age	ant, or both	h, in the State of F	id 507,1508, Florida Sta Torida: Such change w is of, Section 607,0505,	as authorized	by the corp	ed corporation submits this statement for the purpose of changing Its registered orporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	un tamıllar wili	n, and acc	opt the obligation	is bi, Siicholf 607,0505,	, Florida Statu	ies.	
	Signature, typind o		e of registered agent an			Agent signature	ture required when reinstating) DATE
12. TITLE	D		FFICERS AND D	DELETE	13.	F I	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME	CLAGUE	, W. STE	WART		1.2 NAN		
STREET ADDRESS	550 26 /				1.3 STR	EET ADDRESS	ss
CITY-ST-ZIP	VERO BI	EACH FL				-ST-ZIP	
TITLE NAME	D CLAGUE	M IVN	N	☐ DELETE	2 1 TITL 2.2 NAA		Change
STREET ADDRESS	550 26 A		•			EET ADDRESS	s l
CITY-S1-ZIP	VERO BI					Y-ST-ZIP	"   · · · ·
TITLE				☐ DELETE	31 TITL	E	Change Addition
NAME					3.2 NAN		.
STREET ADDRESS CITY-ST-ZIP						EET ADDRESS Y-ST-ZIP	\$
TITLE				DELETE	4.1 TITL		☐ Change ☐ Addition
NAME					4, 2 NA	ME	
STREET ADDRESS					4.3 STR	EET ADDRESS	s
CITY-ST-ZIP TITLE				DELETE	4.4 CITY 5.1 T(T)	r-ST-ZIP	Change Addition
NAME				ET beteit	5.2 NAN		C Change C Addition
STREET ADDRESS						EET ADDRESS	is
CITY-ST-ZIP						r-\$1-ZIP	
TITLE				☐ DELETE	6.1 TITE		Change Addition
NAME CTOCCY ADDOCCO			\		6.2 NAN		22
STREET ADDRESS CITY-ST-ZIP			)		<b>\</b>	EE1 ADDRESS -St-ZIP	s
14. hereby c	ertify that the	informatic	n supplied with the	his filing cloes not qualif		<del></del>	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

e and that my signature shall have the same legal effect as if made under oath; that I am a oute this report as required by Chapter 607, Florida Statutes; and that my name appears in

**FILED** 

Mar 12 1998 8:00am