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

DOCUMENT # K10443

(5)

PG MANAGEMENT CO.

FILED Feb 09 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 11330 1 ST JOHN INDUSTRIAL PKWY 11330 1 ST. JOHN INDUSTRIAL PKWY						
JACKSONVILLE FL 32246 US		11330 1 ST. JOHN INDUSTRIAL PKWY JAKSONVILLE FL 32246		T .		
		U\$	U\$		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
1					01/04/1988	1
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied Fo	,
21 26					59-2864199 Not Applica	able
Suite, Apt.	#, etc.	Suite, Apl. #, etc.			6. Certificate of Status Desired \$8.75 Additiona Fee Required	ıl
City & State	0	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Z _(β) Country 30		Ŋ	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curre	ent Registered Agent			10, Name and Address of New Registered Agent	=
	SILA, NEIL E.		8	1 Nam	ame	
11330 1 ST. JOHNS INDUSTRIAL PKWY JACKSONVILLE FL 32246			8	2 Stree	Street Address (P.O. Box Number is Not Acceptable)	
JAL	JKSUNVILLE FL 32246		8	3		\dashv
ŀ						
			8	4 City	FL 85 Zíp Code	- 1
11, Pursuant office or ragont La	to the provisions of Sections 607.05 egistered agent, or both, in the Statim familiar with, and accept the obli	02 and 607.1508, Florida Statute te of Florida, Such change was a gations of Section 607.0505, Flo	es, the abo authorized l orida Statut	ve-name by the co	imed corporation submits this statement for the purpose of changing its register o corporation's board of directors. I hereby accept the appointment as registers	red ed
SIGNATURE						
12.	Signature, typed or printed name of reporters in	gent and the if applicable (NOT) ND DIRECTORS	13.	gent signate	pnature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSO	DELETE	1.1 TITLE		Change Add	dition
NAME	ELSILA, NEIL E.		1.2 NAM			
STREET ADDRESS	11330-1 ST. JOHNS INDUST	trial PKWY	1.3 \$TRE	ET ADDRESS	RESS	l.
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY	-ST-ZIP]
TITLE	VTD	☐ DELETE	21 TITLE		☐ Change ☐ Add	lition
NAME	HULSEY, JOHN	MINI DIVINA	2.2 NAM		w	l
STREET ADDRESS	11330-1 ST. JOHNS INDUST JACKSONVILLE FL	INIAL PINT	1	ET ADDRESS]	1
CITY-ST-ZIP TITLE	SACROCITYLEE TE	☐ DELETE	3.1 TITLE	-ST-ZIP	Change Add	noilit
NAME			3.2 NAMI			-
STREET ADDRESS			33 STRE	ET ADDRESS	RESS	l
CITY-ST-ZIP			3 4. CITY	- ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Add	lition
NAME			4. 2 NAM			
STREET ADDRESS			1	et address		- {
CITY-ST-ZIP		DELETE	4.4 CITY 5.1 TITLE		Change Add	tition
TITLE NAME		T'') perest	5.1 FILE		C Griange C Avo	
STREET ADDRESS				: Et address	AFSS.	İ
CITY-ST-ZIP			5.4 City		,	1
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Add	lition
NAME			6.2 NAMI			-
STREET ADDRESS			6.3 STRE	T ADDRESS	RESS	ĺ
CITY-ST-ZIP			6.4 CITY			J
14. I hereby o	certify that the information supplied	with this filing does not qualify fo	or the exem	ption sta	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informat	tion)

indicated on this annual report or suppliemental 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:

fal settil

NEIL E. ELSILA

1/29/98 (904) 565-1901