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 # K12618

"HEELER, ERWIN & FOUNTAIN, P.A.

(0)

FILED May 08 1998 8:00am Secretary of State

i kacıdırı bal giviş ildiği bildi kiddi ildir arbii sıbil bibil bibil bibir bibir bibir bibir bibir bibir

			<u> </u>							
Principal Place of Business Mailing Address									118111481	
9428 BAYMEADOWS ROAD SUITE 230 JACKBOHVILLE FL 32258-0138 US			9429 BAYMEADOWS ROAD SUITE 230 JACKSONVILLE FL 32256-0138 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/21/1988			
2.	Principal Place of Busi	ness	2a. Mailing	2a. Mailing Address			4. FEI Number	Appli	ed For	
21			26				59-2872884	Not A	pplicable	
22	Suite, Apt. #, etc.		Suite, /	Suite, Apt. #, etc.			6. Certificate of Status Desired	\$8.75 Add Fee Requ		
23	City & State		City & State			Election Campalgn Financing Trust Fund Contribution	\$5.00 Ma Added to I			
24		Country 25	Zip 29		intry		8. This corporation owes or has paid the curre Personal Property Tax due June 30.	nt year Intani Yes 🔲 t		
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent				
BRANT MOORE MACDONALD & WELLS PA BARNETT CENTER, SUITE 3100 50 NORTH LAURA ST JACKSONVILLE FL 32201					81	Name				
					82	Street Address (P.O. Box Number is Not Acceptable)				
					63					
_					84	City	FL	85 Zip Co	de	
11	 Pursuant to the provise office or registered as 	sions of Sections 607.0502 gent, or both, in the State	2 and 607.1508 of Florida. Such	, Florida Statutes, the a	bove d by	named corporation	oration submits this statement for the purpose of con's board of directors. I hereby accept the appoi	hanging its re	egistered gistered	

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE WHEELER, R. LAMAR, JR. 12 NAME NAME CR2EG34 9428 BAYMEADOWS ROAD, SUITE 230 1.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 1.4 CITY-ST-ZIP CITY - ST - ZIP Change DELETE SECRETARY Addition TITLE 2.1 TITLE ERWIN, RICHARD J. NAME 2.2 NAME 9428 BAYMEADOWS ROAD, SUITE 230 STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition FOUNTAIN, DONALD A. NAME 3.2 NAME 9428 BAYMEADOWS ROAD, SUITE 230 3.3 STREET ADDRESS STREET ADORESS JACKSONVILLE FL CITY-ST-2IP 3.4. CITY - ST-ZIP DELETE Addition TITLE 4.1 TITLE Change NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Addition NAME 6.2 NAME 6.3 STREET ADDRESS 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). Plorida 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 or an attachment with an address.

SIGNATURE:

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

4130178

(904) 733-4335