COF ANNU	FILE NOW: FILING FEE AN PROFIT CORPORATION ANNUAL REPORT 1998		AY 1ST IS ORIDA DEPARTA Sandra B. M Secretary of DIVISION OF COR	IEN1 OF STATE Northam of State	FILED Feb 02 1998 8:00am Secretary of State		
REGGIE	S ON BLANDING, II	···	(0)				
Principal Place of Business Mailing Address 3809 BLANDING BLVD 3909 BLANDING BLVD JACKSONVILLE FL 32210 JACKSONVILLE FL 32210					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 07/07/1988		
÷ .	ace of Business	2a. Mailing	Address		4. FEI Number	A	pplied For
1 Suite, Apt.	#, etc.	26 Suite, A	Apt. #, etc.		59-2898323	¢0 75	tot Applicable Additional
2		27			5. Certificate of Status Desired	Fee F	Required
City & State	•	28	City & State		 Election Campaign Financing Trust Fund Contribution 		May Be to Fees
Zip 4	Country	Zip		Country	8, This corporation owes or has pa	·	ntangible
•	25 9. Name and Address o	29 f Current Registered A	gent 30	<u></u>	Personal Property Tax due June 10. Name and Address of New Re		
1. Pursuant t office or re agent. I ar SIGNATURE	o the provisions of Sections ogistered agent, or both, in t n tamiliar with, and accept t	607.0502 and 607.1508 he State of Florida. Such he obligations of, Section	, Florida Statutes, i change was auth n 607.0505, Florid	64 City the above-named cor porized by the corpora a Statutes.	poration submits this statement for the p tion's board of directors. I hereby accep	FL []	i Code its registered s registered
	Signature, typed or proted name of reg	pistered agent and little if applicable ERS AND DIRECTORS	e (NO1E: Re	gistered Agent signature requ 13.	red when reinstaling) ADDITIONS/CHANGES TO OFFIC		DC IN 12
itle IAME TREET ADDRESS	SD Smith, Linda G. 3909 Blanding Blvd		DELET E	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		Change	Addition
ITY-ST-ZIP ITLE	JACKSONVILLE FL		DELETË	1.4 CITY-ST-ZIP 2.1 TITLE		Change	Addition
IAME ITREET ADORESS ITY - ST - ZIP	TOWER, R.R. 3909 BLANDING BLVD JACKSONVILLE FL			2.2 NAME 2.3 STREET ADDRESS 2.4 City- St - Zip			
itle Ame Treet addr ess			DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		Change	Addition
ity-st-zip tle Ame irieet address			DELETE	3.4. CITY - ST - ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	Change	Addition
TY-ST-ZIP FLE VME			DELETE	4.4 CITY - ST- ZIP 5.1 TITLE 5.2 NAME		Change	Addition
REET ADDRESS TY - ST - ZIP ILE WIE REET ADDRESS			DELETE	5.3 STREET ADDRESS 5.4 CITY - ST- ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS		Change	Addition
 ITY-ST-ZIP I hereby contracted conditional officer or conditional officer or conditional officer or conditional officer or conditional officer of conditional officer of	ertify that the information sup on this annual report or suppr lirector of the corporation or Ricek 13 if changed or 20	pplied with this filing doe lomental annual report is the receiver or trustee of an attachment with ar a	s not qualify for the stripe and accurate https://www.red.to.exol address	64 CITY-ST-ZIP e exemption stated in e and that my signatu cute this report as req	Section 119.07(3)(i), Florida Statutes, I re shall have the same legal effect as if uired by Chapter 607, Florida Statules;	further certify that the made under cath; th and that my name ap	e information hat I am an opears in