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

PRÔFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

OCUMENT #

MOBLEY - 440 NORTHLAKE, INC.

(8)

Mailing Address

Secretary of State

FILED

May 01 1997 8:00am

1707 ANDREW TALLASSEE AL US		1797 ANDREWS MILL RD TALLASSEE AL 36078-2642 US				
· · · · · · · · · · · · · · · · · · ·				3. Date Incorporated or Qualified 09/27/1988	3a. Date of Last Report 04/24/1996	
277414 31 - 17 Table	ace of Business	26. Mailing Address		4. FEI Number	Applied For	
	tishway 98 East	26 757 Hishwa	y98 East	65-0093187	Not Applicable	
	#, a tc.	I Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
	-261	27 # 14-261 City & State		or octanidate of States Exestred	Fee Required	
	tin FL	28 Vestin F	4-	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
325			Country O W A		Yes No	
and the light	9. Name and Address of Current	Registered Agent		10. Name and Address of New Reg	istered Agent	
ROGER D. STAKE 3228 SW MARTIN DOWNS BLVD, SUITE 1 PALM CITY FL 34990 81 Name— Fayrest C. M & 5/2, Street Address (P.O. Box Number is Not Acceptable) 757 His hway 95 E 45T						
	.		84 City	4-261		
11. Pursuant	o the provisions of Sections 607.0502	and 607, 1508. Florida Statutes	the above-named cou	poration submits this statement for the p	- FL 3ね54/ -	
office or re	egistered agent, or both, in the State of familier with, and accept the obligation	of Florida, Such change was autions of, Section 607,0505, Florid	thorized by the corpora	ation's board of directors. I hereby accep	t the appointment as registered	
SIGNATURE	-found()	Lang Form	rot Comus	Lev 4/15/9	7	
Alexander Comment	6locature, typed or printed name of registered agon	t and title if applicable. (NOTE: I	Registered Agent signature requ	uired when reinstating)	DATE.	
12.	PD OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFIC		
NAME .	MOBLEY, FORREST C., JR.		1.1 TOLE		Change Addition	
STREET ADDRESS	1797 ANDREWS MILL RD		1.2 NAME 1.3 STREET ADDRESS	157 Halman on 3. A	r 46 111 - 2 6 1	
TOTY-ST-ZIP	TALLASSEE AL		1.3 STREET ADDRESS	157 Hishway 98 Eas Destin FL 3254	, 42 14 - 241	
STITLE ST	STD	DELETE	1.4 C(TY-ST-ZIP 2 .1 T(TLE	2571'K F C 3237	Change Addition	
NAME	MOBLEY, NANCY M.		2.2 NAME		E change E Addition	
STREET ADDRESS	1797 ANDREWS MILL RD		2.3 STREET ADDRESS	E7 4:1.4498 End	- ++ K/-26/	
CITY-ST-ZIP	TALLASSEE AL		2. 4 CITY - S1 - ZIP	157 Hisluy98 East Dastin, FL 325	24	
TITLE #		DELETE	3.1 TITLE	Vasi in , FC 323	Change Addition	
NAME		_	3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS		·	
2011Y-\$1-ZP	MATE		3.4. CITY - S1 - 2IP			
mu		DELETE	4,1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS	a a		4.3 STREET ADDRESS]	
CITY-STAZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME	•	_	5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CHTY-ST-ZIP	<u>.</u>		5.4 CITY - ST - ZIP			
ma !		☐ DELETE	6,1 TITLE		Change Addition	
NAME		- -	6.2 NAME		Tradition	
STREET ADORESS			6.3 STREET ADDRESS			
THURLING !			0.3 STREET ADDRESS			

64 CITY-ST-ZIP

Go 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 am 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.