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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

K39561

(1)

THE PARKINS FIXED ASSET MANAGEMENT CORPORATION

Principal Place of Business 1800 E ROBINSON STREET Mailing Address

FILED Feb 05 1998 8:00am Secretary of State



1600 E ROBINSON STREET ORLANDO FL 32903				1600 E ROBINSON STREET ORLANDO FL 32803					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
2. Principal F	Place of Busin	200	- 20	Mailing Address					10/14/1988 4. FEI Number Applied For		
21				26					Applied For		
Suite, Apt. #, etc.			20	Suite, Apt. #, etc.					59-2913713 Not Applicable \$8.75 Additional		
22			27	¬					5. Certificate of Status Desired Fee Required		
City & State			1	City & State					6. Election Campaign Financing \$5.00 May Be		
23			28						Trust Fund Contribution Added to Fees		
Zip	Country			Zip Country			У		8. This corporation owes or has paid the current year Intangible		
24		25	29		30				Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent									10. Name and Address of New Registered Agent		
PARKINS, JR., RAYMOND A PH.D.						81	' '	Name			
1600 E ROBINSON ST-STE 400							2 3	Street Addres	ess (P.O. Box Number is Not Acceptable)		
ORLANDO FL 32803							-				
							L				
						84	· '	City	FI_ 85 Zip Code		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE											
Signature, typed or printed name: of registered agent and title if applicable. (NOTE. Registered Agent signature req								signature required			
12. TITLE	PSTD	OFFICERS AND	DIREC	DELETE	13	_			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
NAME		JR., RAYMOND A PI	חו	CT Deceie		TITLE			L Change L Addition		
STREET ADDRESS 1516 LAKESHORE DRIVE				1.2 NAME			T 40	D0000			
CITY-ST-ZIP ORLANDO FL 32803				1,3 STREET ADDRES 1,4 CITY - ST - ZIP							
TITLE	V			DELETE 2.1 T			31-2	3P	X Change		
NAME	PARKINS, P S			2.2 No					Jac on Migo		
STREET ADDRESS 1949 JAPONICA PLACE				2.3 ST			ĭ ADI	DRESS			
CITY-ST-ZIP	1177 7777 - 4 74 74			2, 4 0			2. 4 CITY-ST/ZIP		32792		
TITLE				DELETE 3.1 TI					☐ Change ☐ Addition		
NAME				3.2 NA							
STREET ADDRESS					3.3 STREET ADDRESS			DRESS			
City-St-ZiP					3.4, CITY - ST- ZIP			(IP			
TITLE				DELETE	E . 4.1 TITLE			-	Change Addition		
NAME					4.2	NAME					
Street address					4.3	STREET	ADD	DRESS			
CITY - ST - ZIP				I Downer		CITY-S	3T- Z	IP.			
TITLE				DELETE		TITLE			L Change L Addition		
NAME						MAME					
STREET ADDRESS						STREET					
CITY+ST-ZIP				DELETE		EITY-S	T-2	iP	[] Above [] Day		
TITLE				TT DETELE	6.1	TITLE			Change Addition		

14. Thereby certify that the information supplied with this filling 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 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 odd each of the receiver of the corporation of the receiver of the rec

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

at −aktali (JP7)

7-01 QUA

1/4/68

E034 (10/97)