## 3-36-98 B 3747 C 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 # K55244

(3)

EDW. J. ADOLPHSON, INC.

## **FILED** Mar 26 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address									I HORIOTH CAN ATTOL CHILD THE CONTRACTOR				BIOH FOOT		
% EDWARD J. ADOLPHSON 916 CMARRON CIR NW BRADENTON FL 34209			9	% EDWARD J. ADOLPHSON 916 CIMARRON CIR NW BRADENTON FL 34209					DO NOT WRITI	E IN THIS :	SPACE				
DIADENTON I	1 6 97609				ADDENTON TE CALO				Ì	3. Date incorporated or Qualified					7
									]	12/20/1988					
2. Principal Pl	lace of Busin	1055		28.	Mailing Address				-	4. FEI Number			App	lied For	
21				26						65-0087701		<u> </u>		Applicable	2
Suite, Apt.				27	Suite, Apt. #, etc.					5. Certificate of Status Desired		7	75 A	ditional pired	
City & State	Đ			28	City & State					6. Election Campaign Financing Trust Fund Contribution				Aay Be Fees	
Zip		Country	,,		Zip	Cov	Country			8. This corporation owes or has paid the current year Intangible					
24		25		29		30				Personal Property Tax due Jun		Yes	_ <u>×</u>	No	
	9, Name	and Address	of Current	Regis	itered Agent		_			10. Name and Address of New R	egistered .	Agent			_
AD	OLPHSON,	EDWARD J.					81	Name							
	CIMARRO ADENTON	N CIR NW FL 34209					82	Street	Addres	s (P.O. Box Number is Not Accepta	ble)				
							83								
							84	City			FL	. 1	Zip C		
11. Pursuant to office or reagent. I a	to the provis egistered ag m familiar wi	ions of Section jent, or both, in ith, and accep	ns 607.0502 In the State of It the obligat	and 6 I Flori ions o	07.1508, Florida Statu da. Such change was f, Section 607.0505, Fl	les, the a authorize orida Sta	bove d by tutes	e-named / the corp s.	corpor poration	ation submits this statement for the i's board of directors. I hereby acce	purpose of pt the app	changi ointmen	ng its it as r	registered egistered	
SIGNATURE															
	Signature, typed	or printed name of	registered agent			E: Registere	d Age	ent signature	required	when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CEDS AND	DIREC	TODE	1NI 12	<b>⊣</b> £
12.	D	OFF	ICENS AND	DIRE	DELETE	1,1 1	TI F		D		CENS AND	Chai		Addition	,⊢3
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CITY-ST-ZIP								ST-ZIP							
	certify that th	e information	tiw bailagus	h this	filing does not qualify f				ed in Se	ection 119 07/3Vi) Florida Statutes	I further ce	ertify the	t the i	nformation	1

r nereby certify that the information supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio 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 address.

ADOLPHSON, EDWARD J.

19 MARCH 1998

941-792-3788