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 # K60079

(6)

BAUMER, BRADFORD & WALTERS, P.A.

FILED Apr 27 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address			a toda Batt die driet dasse dasse todad aber dider dider dider mant diase ment						
		~							
50 N LAURA	ST	50 N LAURA ST							
STE 2200		JACKSONVILLE FL 32202	STE 2200		DO NOT WRITE IN THIS SPACE				
JACKSONVILLE FL 32202		JACKSCHVILLE PL 32202				2	Date Incorporated or Qualified	J, 710L	
							01/12/1989		
2. Principal Place of Business 21		2a. Mailing Address	2a. Mailing Address			4.	FEI Number	Αţ	oplied For
		26	26				59 -29 52713	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			S8.75 Addition			Additional	
22		27				5, Certificate of Status Desired Fee Required			equired
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be			May Be	
23		28					Trust Fund Contribution		to Fees
Zip	Country	Zip	Cour	ntry		8.	This corporation owes or has paid the cur	rent year Int	<u>a</u> ngible
24	25	29	30				Personal Property Tax due June 30.	Yes] No
	 Name and Address of Curre 	nt Registered Agent				10.	Name and Address of New Registered	Agent	
W	ALTERS, MICHAEL A.		[81	Name				
	8135 GREEN GLAD ROAD			82	Strock Add	lener (D	O Roy Number is Not Assentable)		
JACKSONVILLE FL 32256					82 Street Address (P.O. Box Number is Not Acceptable)				
•	17.14 51111000 1 0 00000		ŀ	83					
			į						
				84	City		FL	85 Zip	Code
44 Pursuant	to the provisions of Sections 607.05	02 and 607 1508. Florida Statute	es the ab		e-named corr	poration	n submits this statement for the purpose of	changing i	ts registered
office or	renistered about, or both, in the Stat	e of Florida. Such change was a	uthorized	ibν	the corpora	ation's b	poard of directors. I hereby accept the app	ointment as	registered
_	am familiar with, and accept the obli	yanoris of, Section 607.0505, Flo	inda Stati	utes	> .				
SIGNATURE	Signature, typed or printed name of registered a	pent and title if applicable (NOTE	Registered	l Age	nt signature requi	red when	renstating) DATE		
12.		ND DIRECTORS	13.		<u> </u>		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12
TITLE	1 0	DELETE	1.1101	LE.		<u></u>		Change	Addition
NAME	BAUMER, THOMAS M.		1.2 NA					-	
STREET ADDRESS	50 N. LAURA STREET, STE.	2200			ADDRESS				
	JACKSONVILLE FL				· · · ·				
CITY-ST-ZIP	D	DELETE	1.4 CR		1-211			Change	Addition
TITLE	*	טוננונ 🗀	2.1 TIT					☐ oligilige	L. AUGIBUII
NAME BRADFORD, DANA G., II		0000	2.2 NAME						
STREET ADDRESS		2200	2.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 CI	TY-S	ST-ZIP		. ::		
TITLE	D	☐ DELETE	3.1 111	ILE				Change	Addition
NAME	WALTERS, MICHAEL A.		3.2 NA	ME	ļ				
STREET ADDRESS	50 N. LAURA STREET, STE.	2200	3.3 ST	REET	ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL		3.4 CI		1				
TITLE		DELETE	4.1 7(1			· · · · ·		Change	Addition
NAME		_	4.2 N/					=	
					ADDRESS				
STREET ADDRESS			1						
CITY-ST-ZIP		☐ DELETE	4.4 Cil		1 - ZIP			Change	Addition
TITLE		□ הנונונ	5.1 TiT					— civilit	Augrion
NAME			5.2 NA						
STREET ADDRESS			5.3 S1	REET	ADDRESS				
CITY-ST-ZIP			5.4 CI	TY - S	T-ZIP			-	
TITLE		DELETE	6.1 111	rle.	_			Change	Addition
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 ST	REET	ADDRESS				
OFFI OF BUT									

14. I 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 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 altachment with an address.