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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED**

Jan 14 1997 8:00am

Secretary of State

904 737-6595

DOCUMENT # K64198

Principal Place of Business

4533 SUNBEAM ROAD, SUITE 103

% FRANCIS T. JOURA JR

JACKSONVILLE FL 32257

CITY - ST - 76

SIGNATURE:

appears in Block 12 or Block 13 if change

(0)

Mailing Address

% FRANCIS T. JOURA JE

4533 SUNBEAM ROAD, SUITE 103

JACKSONVILLE FL 32257-8141

FIRST COAST ENTERPRISES OF NORTHEAST FLORIDA INC

3. Date Incorporated or Qualified 3a. Date of Last Report 02/02/1989 02/06/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2932136 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Žιο Country Country This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name JOURA, FRANCIS T. JR 29 OAKS DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32250 83 84 Zip Code 11. Pursuant to the provisions of Sections 617.0502 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 objection 607.0505, Florida Statutes. uca SIGNATURE (NCTI - Hetjistered Atjent signature required when reinstating) 12. S AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)DELETE HILE 1.1 THILE Change JOURA, FRANCIS T. JR NAME 1.2 NAME 29 OAKS DRIVE STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL 001Y - ST - ZIP 4 CITY - ST- ZIP DELETE DV TITLE 2.1 TITLE Change Addition WASHINGTON, GEORGE RAY NAME 2.2 NAME **4210 STACEY RD EAST** STREET ACORESS 2.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 2 4 CHY- ST-ZIP OFFE HILE 3.1 TITLE Change Addition BERLINGHOFF, JEFF NAME: 3.2 NAME 6810 SAN SOUCI RD STREET ADDRESS 3.3 STREET ADDRESS JACKSONVILLE FL CITY - ST - ZIP 34 CITY-SY-ZIP DEFEI THILE 4 1 TITLE Change Addition NAV: 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS City - S1 - 7IF 4.4 CiTY-ST-ZiP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAM5 STREET ADDRESS. 5.3 STREET ADDRESS CHY - \$1 - 740 5.4 CITY - ST - ZIP DELETE TIL.F 6.1 HILE Change Addition NAME 6.2 NAME STHEET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - \$1 - Z(P 14. I do 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 it am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name