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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

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FLORIDA PLANNING GROUP, INC.

FILED Apr 22 1998 8:00am Secretary of State



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| JACKSONVILLE FL 3236 US | Not Applicable 5 Additional Required 10 May Be ad to Fees Intangible No ip Code g its registered as registered ORS IN 12 |
| 2. Principal Place of Business 2. Mailing Address 4. Fil Number 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 3. Determinance of Status Desired | Not Applicable 5 Additional Required 10 May Be ad to Fees Intangible No ip Code g its registered as registered ORS IN 12 |
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| Suite, Apt. #, etc. Suite, Apt. #, etc. | Required DO May Be and to Fees Intangible No ip Code g its registered as registered ORS IN 12 |
| City & State Country R, This corporation owes or has paid the current year personal Property Tax due June 30. | ip Code g its registered as registered ORS IN 12 |
| 28 Trust Fund Contribution Add Add | ip Code g its registered as registered ORS IN 12 |
| Zip Country 7:p Country 7:p Personal Property Tax due June 30. | ip Code g its registered as registered ORS IN 12 |
| 25 29 30 Personal Property Tax due June 30. | ip Code g its registered as registered ORS IN 12 |
| 9. Name and Address of Current Registered Agent ALLEN BRINTON & SIMMONS PA 3220 INDEPENDENT SQUARE JACKSONVILLE FL 32202-2026 82 Street Address (P.O. Box Number is Not Acceptable) 83 PL 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 changir 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 agent. I am familiar with, and accept the obligations of, Soction 607.0505, Florida Statutes. SIGNATURE Signature, typicd or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OATE 12. OF FICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TITLE DELETE 1.1 TITLE WRIGHT, ELANE S. 8025 BAYMEADOWS CIR APT 306 1.3 STREET ADDRESS | ip Code g its registered as registered ORS IN 12 |
| ALLEN BRINTON & SIMMONS PA 3220 INDEPENDENT SQUARE JACKSONVILLE FL 32202-2028 82 Street Address (P.O. Box Number is Not Acceptable) 83 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 changir office or registered agont, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment 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 required when reinstalling) OATE 12. OF FICE HS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TITLE NAME WRIGHT, ELANE S. 8025 BACKSONVILLE S. 1.3 STREET ADDRESS 1.3 STREET ADDRESS | g its registered as registered ORS IN 12 |
| 320 INDEPENDENT SQUARE JACKSONVILLE FL 32202-2026 82 Street Address (P.O. Box Number is Not Acceptable) 83 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 office or registered agont, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE OF FICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ITILE NAME WRIGHT, ELANE S. 8025 BAYMEADOWS CIR APT 306 1.3 STREET ADDRESS | g its registered as registered ORS IN 12 |
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| CITY-ST-ZIP JACKSUNVILLE PL 1.4 CITY-ST-ZIP | |
| TITLE DELETE 2.1 TITLE Chan | je 🔲 Addition |
| NAME KELLY, STEPHEN J. 22 NAME | |
| STREET ADDRESS 1625 N BEACH AVE 2.3 STREET ADDRESS 2.3 STREET ADDRESS | |
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| NAME ENGH, EDITH V. 32 NAME | Į |
| STREET ADDRESS 2715 AVE 'A" 33 STREET ADDRESS | ŀ |
| CITY-ST-ZIP NEWPORTVILLE PA 34. CITY-ST-ZIP | |
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I hereby certify that the information indicated on this annual report of st officer or director of the composition Block 12 or Block 13 if changed, or ooks not quality for the exemption stated in Section 1907(3)(i), Florida Statutes. Fluring beliefy that the initiation fluring the fluring to the fluring that it is made under oath; that I am an acceptable to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in