FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

L05220

(3)

OSBORNE, MCNATT, SHAW, O'HARA, BROWN & OBRINGER, PROFESSIONAL ASSOCIATION

Principal Place of Business

Mailing Address

C/O JACK W. SHAW JR. 225 WATER ST STE-1400 JACKSONVILLE FL 32202 C/O JACK W. SHAW JR. 225-WATER ST STE 1400 JACKSONVILLE FL 82202 FILED May 01 1996 8:00 am Secretary of State

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	WLLE FL 32202	JACKSONVILLE FL 622			3. Date Incorporated or Qualified 07/28/1989	3a. Date of Last Report
2. Principal Pla	on of Business	2a. Mailing Address			4. FEI Number	04/28/1995
	or Bay Street	iden i 🗸 🗸 i i 🕏	Z44 (5	2665	59-2959629	Applied For
Suite, Apt.			7 3/	~~~	39-2939029	Not Applicable
22		Suite, Apt. #, etc.			5. Certificate of Status Desired	See Required
City & State	,	City & State	رسر ب		6. Election Campaign Financing	□ \$5.00 May Be
23 JACK	sowille FL	28 JACKSONVILL	t FL		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for in	ntangible tax under s 199.032,
24 322	- [20]		30		Florida Statutes X/Yes	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New R	egistered Agent
			81	Name		
	, JACK W. JR.		82	Street Addre	ess (P.O. Box Number is Not Acceptable	el
1 ENT	ERPRISE CENTER, SUITE 1400				IST BAY STREET	,
	ATER STREET	•	83			
JĄCKS	ONVILLE FL 32202-5147		84	- C-1		
			04	CIACHE	OWVILLE	FL 85 Zip Code 82203
11. Pursuant to	the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-r	amed corpora	ation submits this statement for the purp	soon of obanging its registered office
or registere	ed agent, or both, in the State of Florid h, and accept the obligations of, Section	a. Such change was authorized.	by the corpo	oration's board	d of directors. Thereby accept the appo	intment as régistered agent. I am
	Signature, typed or printed name of registered again t		Registered Agen	signature required	when reinstating)	DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	<u> </u>	☐ DELEIE	1.1 TITLE			Change Addition
NAME	BEARDSLEY, DALE		1.2 NAME		_	
STREET ADDRESS	2 25 WATER ST, STE 140 0		1.3 STREET	ADDRESS /	e east Bay street	- I
CITY-ST-ZIP	J acksonville f l		1.4 CITY - S	I-ZIP J	ACKSONVILLE FL &	12202
TITLE	-6 -	DELETE	2 1 TITLE	50	toretary	Change X Addition
NAME	SPRADLEY, W JACK-	•	2.2 NAME	8	ROUN, HARBS	
STREET ADDRESS	2 25 WATER ST STE14 00		2.3 STREET	ADDRESS //	EAST BAY STREE	r
CITY-ST-ZIP	JACKSONVILLE FL		2.4 CITY - S			2202
TITLE	۷P	☐ DELETE	3. 1 TITLE			Change Addition
NAME	DECANDIO, MICHAEL J.		3.2 NAME			7
STREET ADDRESS	2 25 WATER ST STE 1400		33 STREET	ADDRESS /	l fast Bay stre	65
CITY-ST-ZIP	J acksonville fl		34 CITY-SI		·	2202
TITLE	P	DELETE	4. 1 TITLE			Change Addition
NAME	SHAW, JACK W JR		4.2 NAME			
STREET ADDRESS	225 WATER ST, STE 1400		4.3 STREET	ADDRESS /2	ACKSONVILLE FR 32	7
CITY - ST - ZIP	JACKSONVILLE FL-		4.4 CHY-SI	.7IP	ANKSON WILL FO 20	1004
TITLE		DELETE	5. 1 T:TLE		TO TOOK TOCK TO BE	Change Addition
NAME			5.2 NAME			El susuige El monitori
STREET ADDRESS			5.3 STREET	ADIDRESS		
CITY-ST-ZIP			5.4 C(1Y+S)	i		
TITLE		☐ DELETE	6. 1 TITLE	-20		Change Addition
NAME		band TTTT	6.2 NAME			[] Onlings [] Abordon
STREET ADDRESS			6.3 STREET	UNDEREC.		1
CITY-ST-ZIP						
	certify that the information supplied w	ith this filing is voluntarily furnished	6.4 CITY-ST ed and does		r the exemption stated in Section 119.0	07/(3)/k). Florida Statutes I further

certify that the information indicated on this annual reg ort 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 it is an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

354-0624