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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

DBR & ASSOCIATES, INC.

FILED Apr 01 1998 8:00am Secretary of State



Principal Place of Business	3	Mailing Addre	ess			(#20)1211 253 KRM BIBIO ONN SIDDA (III Biêll Biblt Aibli	81911 8191	1 01611 t001
8011 MERRILL RD STE 18 JACKSONMILLE FL 32277		STE 18	6011 MERRILL RD STE 18 Jacksonville FL 32277 US			DO NOT WRITE IN THIS SPACE			
US	US	3. Date incorporated or Qualified 09/07/1989							
2. Principal Place of Busin	0688	2a. Mailing A	ddress			4. FEI Number		Ap	olied For
21	26				59-2969249			Applicable	
Suite, Apt. #, etc.	Suite, Apt	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	City & Sta	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Zip	Zip Country			8. This corporation owes or has paid the current year Intangible				
24	25 29 30		<u> </u>		Personal Property Tax due June 30. 😾 Yes 🔲 No			No	
9. Name	and Address of Curre	nt Registered Age	nt			10. Name and Address of New Re	gistered Agen	1	
register, d	OUGLAS B.			81	Name				
8011 MERRILL RD STE 18 JACKSONVILLE FL 32277				82	Street A	ddress (P.O. Box Number is Not Acceptable)			
								,	
				84	City		FL 85		
agent. I am familiar wi	lons of Sections 607.05 lent, or both, in the State th, and accept the oblig	02 and 607.1508, F of Florida. Such of pations of, Section 6	lorida Statutes, hange was auth 507.0505, Florid	the abovi norized by la Statute:	e-named c the corpo s.	orporation submits this statement for the eration's board of directors. I hereby acce	purpose of chai pt the appointn	nging its nent as i	registered registered
SIGNATURE Signature typed	or printed name of registered ag	ent and tille if applicable	(NOTE. Re	egistered Age	ant signature re	quired when reinstating)	DATE		
12.	OFFICERS AN	ID DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIR	ECTOR	
TITLE			DELETE	1.1 TITLE				Change	Addition
NAME REGIST	ter, douglas B.			1.2 NAME					
	IERRILL RD STE 18			1.3 STREET	ADDRESS				
0111 01 211	ONVILLE FL	- -		1.4 CITY - 9	T-ZIP				The state of
TITLE S		L.	DELETE	2.1 TITLE			□ ,	Change	Addition
	er, Janine H			2.2 NAME					
O I I I I I I I I I I I I I I I I I I I	ERRILL RD STE 18			2.3 STREET	ADDRESS				
CITY-ST-ZIP JACKS	ONVILLE FL			2. 4 CITY-	ST-ZIP			0	T Addition
TITLE		L.) DELETE	3.1 TITLE	Į.		U'	Change	Addition
NAME				3.2 NAME	i				
STREET ADDRESS				3.3 STREET					
CITY-ST-ZIP			DELETE	3.4. CITY-	ST-ZIP		— П	Change	Addition
TITLE		L	1 DETE LE	4.1 TITLE				er italiyid	
NAME				4.2 NAME	ADDRESS				
STREET ADDRESS									
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	DELETE	4.4 CITY-S 5.1 TITLE	SI-ZIP			Change	Addition
TITLE		L	J	5.2 NAME				•	
NAME CIRCLI ADDOCCC					ADDRESS				
STREET ADDRESS				5.4 CITY-					
CITY-ST-ZIP TITLE		- Г	DELETE	5.4 CITY-	Di- Cir			Change	Addition
		-		6.2 NAME			_	•	- -
NAME CTREET ADDRESS				1	ADDRESS				
STREET ADDRESS				6.4 CITY-1	i				
City-St-ZiP 14. I hereby certify that the	e information supplied	with this filing does	not qualify for t	he exem	otion stated	in Section 119.07(3)(i), Florida Statutes.	I further certify	that the	information

Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. Further certify that it 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, of on an attachment with an address.

CNATURE.

3/27/98 (90.4) 7/43-0169