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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

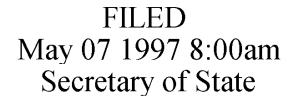
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L39632

(9)

FIRST COAST CALIBRATION	, INC.
Principal Place of Business	Mailing Address
MAN BEACH BOHLEVADO	5220 DEACH DOLLEVADO





Principal Place of Business Mailing Address 5228 BEACH BOULEVARD JACKSONVILLE FL 32207 JACKSONVILLE FL 32207-5022				al de la companya de					
						3. Date Incorporated or Qualified 12/22/1989	1	ate of Last Re 25/1996	eport
2. Principa P	race of Business	2a. Mailing Address				4. FEI Number			plied For
21		26				59-2984203		No	t Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	
22		27			-11-P3.	5. Germicate of States Desired		Fee Re	
City & Stat	0	City & State				6. Election Campaign Financing	\Box	\$5.00	
23	Country	28 Ziro	Cou	tru		Trust Fund Contribution		Added t	•
24	Zip Country Zip		30	nin y		B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
[24]	4			T		10. Name and Address of New Registered Agent			
WIN	KLER, JOHN S.			81	Name		<u></u>		
	OAK STREET			82	Street Add	iress (P.O. Box Number is Not Acceptal	\a\		
	KSONVILLE FL 32204			62	Street Add	iless (r.o. Box Noriber is Not Acceptai	леу		
				83					
				84	City			85 Zip (Code
ĺ					(Oily		FL	,	
SIGNATURE	Stendon, typist of professione of regulered a OFFICERS AI	gent and title if applicable, (NO	OTE Registere	d Age	ont signature requ	ired when renstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND	DIRECTOR	S IN 12
3013	P	DELETE	1.1 TI	TLE				Change	Addition
hAME	HELLMIG, RICHARD G. SR.		1.2 N	AME					
SIREL ADDRESS	5228 BEACH BOULEVARD		1.3 \$	TREET	ADDRESS				
(alr-SEZ#	JACKSONVILLE FL	- CACLETE			IT - ZiP			Charac	T Addition
THE	TS DECORPTION OF COURT	DELETE	2.1 TI		}			☐ Change	L_ Addition
SAME	Ruckersfeldt, george e. 5228 Beach Blvd.	•	22 N		Abprocon				
STREET ADORESS	JACKSONVILLE FL				ADDRESS ST-ZIP	}~ ♦			
COTY - ST - ZOP - NOVE	UNONSOTTILLETE	DELETE	3.17	_	31-21	the second secon		Change	Addition
NAME:			3.2 N			*			
STREET ADDRESS			3.3 S	TAEET	ADDRESS				
C(17 - S* - Z(2)			34.0) TY-5	ST - ZIP				
DTLE		DELETE	4,1 TI	TLE				Change	Addition
SAME			4.21	AME					
SPREEL ADORESS			4.3 S	TREET	ADDRESS				
01" \$1-76°		I priess			T-ZIP			1 00	4 3 3 11 1
Mit		☐ DELETE	5.1 T		j			L Change	L Addition
NAM:			5.2 N		ABBOTOS				
SIRFEL ADDRESS					ADDRESS				
LOTAL STATE		☐ DELEYE	6.1 T		ST - ZIP			Change	Addition
NAME			6.2 N					Complete Section Secti	
STREET ADDRESS					ADDRESS				
GEY SE 72					ST-ZIP				
F 50 7 50 705	1	. d. dis this time days as a				d in Contine 110 07/3/i) Florido Statute	a 1 forther	r antifuthat	the

I do hereby certify that the information supplied with this titing does not quality 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 Lam 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 attachment with an address.

0031604