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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L40385

1998

(1)

JIM PARHAM & ASSOCIATES, INC.

FILED Feb 06 1998 8:00am Secretary of State

|--|--|

Principal Place of Business Mailing Address										
			6700 S. FLORIDA AVE.							
SUITE #33 LAKELAND FL 33813			SUITE #33 Lakeland Fl 33813			DO NOT WRITE IN THIS SPACE				
	S		US			3. Date Incorporated or Qualified				
						01/05/1990				
			2a. Mailing Address			4. FEI Number	Applied For			
			26	—		59-2984817	Not Applicable			
	Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired 38.75 Addition					
22				27]			Fee Required			
_	City & Stat					6. Election Campaign Financing	\$5.00 May Be			
23	Zip	Country	28	Countr	N.	Trust Fund Contribution	Added to Fees			
24	Zip	<u>├</u> `	<u></u>		У	8. This corporation owes or has paid the cur	rent year Intangible ZYes □ No			
24		25 29 30 30 9. Name and Address of Current Registered Agent				Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent				
	16.6			81	Name	10.				
		I PARHAM		<u> </u>	ļ					
5146 COLBERT ROAD LAKELAND FL 33813				82	Street A	Address (P.O. Box Number is Not Acceptable)				
				83	 					
				84	City	FL	85 Zip Code			
11	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 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 obligations of, Section 607.0505, Florida Statutes.									
51	GNATURE	Signature, typed or printed name of registered	agent and title if applicable (NOT)	: Registered Aç	jent signature :	required when reinstating) DATE	— —— ————			
12	•	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12			
TIT	LE	OVP	☐ DELETE	11 TITLE			☐ Change ☐ Addition			
NA	ME			12 NAME						
STF	REET ADDRESS			1.3 STRFE	1 ADDRESS		[
CIT	Y-ST-ZIP	LAKELAND FL 140		1.4 CITY-	ST-ZIP					
TET	LE	DST	☐ DELETE	2.1 THTLE	- 1		Change Addition			
NAI	ME	Parham, Elizabeth ann		2.2 NAME						
STREET ADDRESS 5146 COLBERT RD				2 3 STREE	1 Address]			
CIT	Y-\$T-ZIP	LAKELAND FL		2.4 CITY-	ST - ZIP					
TIT	LE .		L DELETE	3.1 TITLE	}		Change Addition			
NAP				3.2 NAME						
STF	EET ADDRESS			3.3 STREE	T ADDRESS					
	ITY-ST-ZIP			3.4. CITY -	ST-ZIP					
TIT				4.1 TITLE			Change Addition			
NAP				4.2 NAME			ĺ			
	EET ADDRESS				TADDRESS					
	Y-ST-ZIP		T prieze	4.4 CITY-	ST-ZIP					
TITL			DELETE	5.1 TITLE			Change Addition			
NAJ	ſ			5.2 NAME			1			
	EET ADDRESS				I ADDRESS		Ì			
	Y-ST-ZIP			5.4 CITY-	ST - ZIP		[] (b			
TITL			☐ DELETE	6.1 TITLE			Change Addition			
NAM				6.2 NAME						
	EET ADDRESS			•	ADDRESS [ĺ			
CIT	Y-ST-ZIP			6 4 CITY -	ST-ZIP					

14. I hereby certify that the information supplied with this filling 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 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 on an attachment with an address.

Elizabeth Ann Ingram Parlan, Seftms, 1/28/98