

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

FILED

Apr 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **L51623** (1)

1. Corporation Name
HENSLICK, SEAGLE & ASSOCIATES, INC.

Principal Place of Business
**1748 INDEPENDENCE BLVD.
SUITE E-7
SARASOTA FL 34234**

Mailing Address
**1805 MAIN STREET STE 705
P.O. DRAWER 4275
SARASOTA FL 34230-4275**

Same



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21. Suite, Apt. #, etc.		26. 1748 Independence Blvd		02/16/1990	
22. City & State		27. E-7		4. FEI Number	
23. Zip		28. Bradenton, FL		65-0184609	
24. Country		29. U.S.		5. Certificate of Status Desired	
				<input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SCHEB, ROBERT P. 1805 MAIN STREET SUITE 705 SARASOTA FL 34238				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83. Suite 3			
				84. City			
				85. Zip Code			
				Sarasota FL 34237			

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
1.1 TITLE				1.1 TITLE			
1.2 NAME				1.2 NAME			
1.3 STREET ADDRESS				1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP				1.4 CITY-ST-ZIP			
2.1 TITLE				2.1 TITLE			
2.2 NAME				2.2 NAME			
2.3 STREET ADDRESS				2.3 STREET ADDRESS			
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6.1 TITLE				6.1 TITLE			
6.2 NAME				6.2 NAME			
6.3 STREET ADDRESS				6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing 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.

SIGNATURE: *Robert P. Scheb* **Robert P. Scheb** 4/9/98 741-357-7728

CR2E034 (10/97)