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May 13 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L62293 (0)  
1. Corporation Name  
MORNINGSIDE MANAGEMENT, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: C/O V. M. THOMAS, 2284 S. OCEANSHORE BLVD., FLGLER BEACH FL 32136-4021 US  
Mailing Address: PO BOX 218, FLGLER BEACH FL 32136-4021 US

3. Date Incorporated or Qualified: 04/04/1990

2. Principal Place of Business: 21 Suite, Apt. #, etc.

2a. Mailing Address: 26 Suite, Apt. #, etc.

4. FEI Number: 59-3156003  
Applied For: Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired: \$8.75 Additional Fee Required

23 Zip: 24 Country: 25

28 Zip: 29 Country: 30

6. Election Campaign Financing: \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent: THOMAS, V. M., 2284 S. OCEANSHORE BLVD., FLGLER BEACH FL 32136

10. Name and Address of New Registered Agent: 81 Name, 82 Street Address, 83, 84 City, 85 Zip Code

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

Table with 12 rows and 2 columns: OFFICERS AND DIRECTORS. Columns include TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and a DELETE checkbox.

Table with 12 rows and 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Columns include 1.1-1.4, 2.1-2.4, 3.1-3.4, 4.1-4.4, 5.1-5.4, 6.1-6.4, and checkboxes for Change and Addition.

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.

CR2E034 (10/97)