

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

FILED
May 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **L72570** (9)
1. Corporation Name
TEAM WET DREAM, INC.



Principal Place of Business
**ROUTE 5, BOX 908E
LAKE CITY FL 32024
US**

Mailing Address
**ROUTE 5, BOX 908E
LAKE CITY FL 32024
US**

DO NOT WRITE IN THIS SPACE

* POST OFFICE
CHANGED ADDRESS

2. Principal Place of Business 21 ROUTE 22 BOX 9085 Suite, Apt. #, etc. 22 City & State 23 LAKE CITY, FL Zip 24 32024 Country 25 US	2a. Mailing Address 26 ROUTE 22 BOX 9085 Suite, Apt. #, etc. 27 City & State 28 LAKE CITY, FL Zip 29 32024 Country 30 US
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3. Date Incorporated or Qualified 05/14/1990	4. FEI Number 59-3008324	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <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
**HAYTER, WILLIE B., III
RT. 5, BOX 908E
LAKE CITY FL 32055**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
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 (if applicable)

(NOTE: Registered Agent signature required when reinstating)

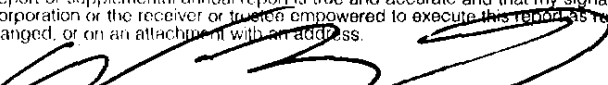
DATE

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	PST HAYTER, W.B., III
STREET ADDRESS	RT. 5, BOX 908E
CITY-ST-ZIP	LAKE CITY FL
TITLE	<input type="checkbox"/> DELETE
NAME	D HAYTER, W.B., III
STREET ADDRESS	RT. 5, BOX 908E
CITY-ST-ZIP	LAKE CITY FL
TITLE	<input type="checkbox"/> DELETE
NAME	V REED, CHARLES
STREET ADDRESS	RT. 5, BOX 908E
CITY-ST-ZIP	LAKE CITY FL
TITLE	<input type="checkbox"/> DELETE
NAME	D HAYTER, CARLA S.
STREET ADDRESS	RT. 5, BOX 908E
CITY-ST-ZIP	LAKE CITY FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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:



4-28-98 (904)
755-1033

CR2E034 (10/97)