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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 28 1998 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

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| CLAIM | RESOLUTION MANAGEM | ENT, INC, | | | | | | |
|---|---|---|-------------------------------|-------------|---|------------------|-------------------|---------------|
| Principa! Place | e of Business | Mailing Address | · | | | OBT HOL BIOLOGIC | | AI 01011 (00) |
| 102 COLUME | RIA NRIVE | 102 COLUMBIA DRIVE | | | | | | |
| SUITE 205 SUITE 205 | | | | | | | | |
| CAPE CANAVERAL FL 32820 CAPE CANAVERAL FL 3 | | | 2920 | | DO NOT WRITE IN THIS SPACE | | | |
| US | | US | | | 3. Date Incorporated or Qualific | ∌d | | |
| O Delmained D | least During | A. 14.75. A.H. | | | 05/03/1988 | | | |
| - | lace of Business | 2a. Mailing Address | | | 4. FEI Number | | - | plied For |
| Suite, Apt. | # Atc | Suite, Apt. #, etc. | | | 59-2960086 | | | t Applicable |
| - | #, 6 (C. | 27 | | | 5. Certificate of Status Desired | | \$8.75 A | |
| City & State | e | City & State | | | E Floation Compaign Financia | | | |
| 23 | - | 28 | | | 6. Election Campaign Financin Trust Fund Contribution | , [] | \$5.00 Added t | |
| Zip | Country | Zip | Country | | 8. This corporation owes or has | | | |
| 24 | 25 | · | 30 | | Personal Property Tax due J | · | | No |
| | 9. Name and Address of Curre | | | | 10. Name and Address of New | | | |
| H | ARTLEY, CHARLES L. | | 81 | Name | | | | |
| | HOLMAN RD. | | 82 | Stroot Add | ress (P.O. Box Number is Not Acce | atable) | | |
| CAPE CANAVERAL FL 32920 | | | اعقا | Street Add | ress (F.O. BOX NUMBER IS NOT Acce | nable) | | |
| • | | | 83 | | | | | |
| | | | 84 | Oit. | | | | 2-4 |
| | | | 04 | City | | FL | 85 Zip 0 | >00e |
| office or re agent. I a SIGNATURE | to the provisions of Sections 607.056 egistered agent, or both, in the State in familiar with, and accept the oblig signature, typed or printed name of registered ag | e of Florida. Such chan ge w as a gations of, Section 607.0505, Flo | uthorized by rida Statutes | the corpora | tion's board of directors. I hereby ad | ccept the app | ointment as | registered |
| 12. | _ <u></u> | ID DIRECTORS | 13. | | ADDITIONS/CHANGES TO O | | DIRECTOR | S IN 12 |
| TITLE | DP | ☐ DELETE | 1.1 TITLE | | | | Change | Addition |
| NAME | HARTLEY, CHARLES | | 12 NAME | | | | | |
| STREET ADDRESS | →400 HOLMAN ROAD | | 13 STREET / | ADDRESS 📜 | 199 Holman Ro | ad | | |
| CITY-ST-ZIP | CAPE CANAVERAL FL | | 1.4 CITY- ST | 1 | | | | |
| TITLE | DST | DELETE | 2.1 TITLE | | | | Change | Addition |
| NAME | HARTLEY, KAREN S. | | 2.2 NAME | ĺ | | | | |
| STREET ADDRESS | -499 HOLMAN ROAD | | 2.3 STREET A | ADDRESS 3' | 99 Holmen Road | i - | | |
| CITY-\$T-ZIP | CAPE CANAVERAL FL | | 2. 4 CITY - ST | T-ZIP | • | | | |
| TITLE | | DELETE | 3.1 TITLE | | | | Change | Addition |
| NAME | | | 3.2 NAME | | | | | |
| STREET ADDRESS | | | 3.3 STREET A | ADDRESS | | | | |
| CITY-ST-ZIP | | | 3.4. CITY - \$1 | T- ZIP | | | | ļ |
| TITLE | | DELETE | 4.1 TITLE | | | | Change | Addition |
| NAME | | | 4. 2 NAME | | | | | |
| STREET ADDRESS | | | 4.3 STREET / | ADDRESS | | | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST | - ZIP | | | | |
| TITLE | | DELETE | 5.1 TITLE | | | | ☐ Change | Addition |
| NAME | | | 52 NAME | } | | | | |
| STREET ADDRESS | | | 5.3 STREET A | ADDRESS | | | | |
| CITY-ST-ZIP | | | 5.4 CITY-ST | - ZIP | | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | | | Change | Addition |
| NAME | | | 6.2 NAME | | | | | |
| STREET ADDRESS | | | 6.3 STREET A | ADDRESS | | | | |
| | | | 1 | | | | | |

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 suppliemental 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. Charles L. Hartley 4/21/00 402 200 0204