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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M87429

(0)

THOMAS RILEY BAKER, III, P.A.

FILED							
May 20 1998 8:00am							
Secretary of State							

INOMA	S file F DANER, III, F.A.					
Principal Place of Business Mailing Address			ess			(BI) GION BIBN BIBN BIBN 1881
725 NORTH H SUITE E-208 JUPITER FL 3	725 NORTH HIGHWAY SUITE E-208 JUPITER FL 33477			DO NOT WRITE IN TH	IS SPACE	
					3. Date Incorporated or Qualified	
L					06/20/1988	
	lace of Business	2a. Mailing Address	. Mailing Address		4, FE/ Number	Applied For
21		26		65-0063154	Not Applicable	
Suite, Apt.	Suite, Apt #, etc.	ilte, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	9	Cily & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip Country		Zip			8. This corporation owes or has paid the	current year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
	g. Name and Address of Curren	t Registered Agent			10. Name and Address of New Register	d Agent
	K er , Thomas Riley, III		8	Name		
725 NORTH HWY. A-1-A			8	Street Add	ress (F.O. Box Number is Not Acceptable)	
	ITE E-208 PI TE R FL 33478		8	13		
301	HIGH I E WITTU			M Cau		ot Zin Codo
			ľ	14 City	F	85 Zip Code
agent. Fai SIGNATURE	m familiar with, and accept the oblige	ations of Section 607.0505,	Florida Statut	tes.	ation's board of directors. I hereby accept the a	
12.	OFFICERS ANI	DELETE DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	Change Addition
TITLE	PVTS		1.2 NAM			
NAME Street address	BAKER, THOMAS RILEY, III 15764-129TH PLACE N.			EET ADDRESS		
CITY-ST-ZIP	JUPITER FL 33478		1	-ST-ZIP		
TITLE	SD DELETE		2 1 1171			Change Addition
NAME	BAKER, THOMAS RILEY, IN		2 2 NAM	IE		
PTOTET ADDRESS	15764-129TH PLACE N.		2.3 S1RE	ET ADDRESS		
CITY-ST-ZIP	JUPITER FL		2. 4 C(T)	Y - ST - ZIP		
TITLE		☐ DELETE	3.1 T(TLE	E .		Change Addition
NAME			3.2 NAM	ie [
STREET ADDRESS			3.3 STRE	EET ADDRESS		
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·			Y-ST-71P		
TITLE		L_] DELETE	4.1 11fL			Change Addition
NAME			4. 2 NAN	l		
STREET ADDRESS				ET ADORESS		
CITY-ST-ZIP		☐ OELF1E		- ST-ZIP		Change Addition
TITLE		L_I OLLE IE	5.1 11111			□ rusude □ vaoutou
NAME			5.2 NAM			
STREET ADDRESS				EFT ADDRESS		
CITY-ST-ZIP		DELETE	5.4 C/TY 6.1 TITLE	- \$1 - ZIP		Change Addition
THLE		□ nerene				Thousande The Monitori
NAME OXDEET ADDDECC			6.2 NAM	ì		
STREET ADDRESS			l l	EFT ADDRESS		
CITY-ST-ZIP]	sortify that the information curreled w	th this filling does not available		-SI-ZIP	Section 119 07(3Vi) Florida Statutes I further	certify that the information

14. Thereby 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 empoyant does execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, of on an attachment with an address

NONATURE: MASS

1/27/98 (5h) 744-000