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May 08 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N07875 (0) 1. Corporation Name FLORIDA FIREFIGHTERS INFORMATION AND EDUCATION NETWORK, INC.			
Principal Place of Business ROY JERALDS 1728 BONITA AVE ORLANDO FL 32811 US		Mailing Address ROY JERELOS 1728 BONITA AVE ORLANDO FL 32811 US	
2. Principal Place of Business 21 10150 Belle River Blvd Suite, Apt. #, etc. 22 # 1106 City & State 23 Jacksonville, Fl. Zip 24 32256		2a. Mailing Address 25 10150 Belle River Blvd. Suite, Apt. #, etc. 26 # 1106 City & State 27 Jacksonville, Fl. Zip 28 32256	
29 DUVAL		30 DUVAL	
9. Name and Address of Current Registered Agent JERELOS, ROY 1728 BONITA AVE ORLANDO FL 32811		10. Name and Address of New Registered Agent 81 Name THEODORE O HOLMES 82 Street Address (P.O. Box Number is Not Acceptable) 10150 Belle River Blvd. #1106 83 84 City Jacksonville FL 85 Zip Code 32256	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE THEODORE O. HOLMES, President <i>Theodore O. Holmes</i> 4-13-98 Signature, typed or printed name of registered agent and title, applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD JERELOS, ROY 1728 BONITA AVE ORLANDO FL <input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PRESIDENT THEODORE O. HOLMES 10150 Belle River Blvd #1106 Jacksonville Fl. 32256 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BOOKER T PERRY 2040 ROGERS AVE MAITLAND FL <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP THEODORE O HOLMES 10150 BELLE RIVER BLVD 1106 JACKSONVILLE FL <input checked="" type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	DIRECTOR Ralph Racheals 1610 NW 24 TERRACE FT LAUDERDALE, FL 33311 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ALONZA B BRONNER 2107 HOLCROFT DR JACKSONVILLE FL <input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	DIRECTOR Walter Byrd 3807 Shelby Rd WEST PALM BEACH FL 33407 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEVENSON, FREDDIE JR. 5565 CINDERLAND PKWY #292 ORLANDO FL <input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	DIRECTOR ARTHUR BATTAS 1529 POPPY AVE ORLANDO, FL 32811 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GREGORY BUSH 6851 15TH ST SOUTH ST PETERSBURG FL <input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.			
SIGNATURE: <i>Theodore O Holmes</i>		4-13-98	



CR2037 (10/97)