## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N08865

(0)

PURCHASING COUNCIL OF FLORIDA'S FIRST COAST, INC

## MICHAR_CRIBISTY IT BUSCH DR JACKSONVILLE FL 32216-5555  ## MICHAR_CRIBISTY IT BUSCH DR JACKSONVILLE FL 32216-5555  ## Applie O4/23/1985  ## Applie O4/23/1985  ## FIRE HADDER JACKSONVILLE FL 32216-5555  ## Applie O4/23/1985  ## FIRE HADDER JACKSONVILLE FL 32216-5555  ## Applie O4/23/1985  ## FIRE HADDER JACKSONVILLE FL 32216-5555  ## Applie O4/23/1985  ## Applie O4/23/1985  ## FIRE HADDER JACKSONVILLE FL 32216-5555  ## Applie O4/23/1985  ## Applie O4/23/1985  ## Country Jacksonville FL 32216-5555  ## Applie O4/23/1985  ## Country Jacksonville FL 32216-5555  ## Country Jacksonville FL 32216-55555  ## Country Jacksonvi	•					
Some inclination of control of the provisions of Section 617,0002 and 617,0003, Floridal Statutos, the above-named corporation submits this statement for the purpose of changing lite registers with and accept the obligations of, Section 617,0003, Floridal Statutos, the above-named corporation submits this statement for the purpose of changing lite registers.    Some Address of Current Registered Agent   10, Name and Address of Nov Registered Agent   25   26   27   28   29   30   29   20   20   29   20   20   20   2	Principal Place of Business Mailing Address					
ACRESONILE FL 32216-3595  JACKSONILE FL 3221	% MICHAEL CHRISTY P O BOX 5263					3. Data Incorporated or Ouglified
## Pincipal Place of Business   Zau Mailing Address   S. Certificate of Status Desired   S8.75 Address   S8.				ONVILLE FL 32247-5263		
Reference of Business   2a. Mailing Address   5. Certificate of Status Desired   \$8.75 Add   \$8.75 Add	JACKSONVILL	E FL 32218-5595	US			
22   25   26   27   28   27   29   29   29   29   29   20   29   29						
Suite, Apt. #, etc.	_	Place of Business	<u> </u>			- 0075
City & State		#				Fee Required
City & State   28	_ · ·	#, <b>6</b> [C.				, , , , , , , , , , , , , , , , , , , ,
Zip	<u> </u>	le			•••	
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  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 rediction of 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, 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, 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, or both, in the State of Florida. Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes, the above-named corporation's board of directors. I hereby accept the appointment as 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, 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, 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, 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, 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, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the oppointment as registered agent, or both, in the State of Florida. Such change was authorized by	_ `		——————————————————————————————————————			,
BJORK, ETHEL M.  BLIORK SPRING FOREST AVE  JACKSONVILLE FL 32216  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, florida Statutes. The appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation submits this atterment for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation submits this atterment for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporations board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporations board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporations board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporations board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporations board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporations board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporations board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Statules.  SIGNATURE    10		Country	<del></del>	Countr	у	
BJORK, ETHEL M. 250 SPRING FOREST AVE JACKSONVILLE FL 32216  81  82 Street Address (F.O. Box Number is Not Acceptable)  83  84 City  FL  85 Zip Cod  86  87  88 City  FL  88 Zip Cod  88 Zip Cod  88 Zip Cod  88 Zip Cod  89 Zip Cod  80 Z	24	1201		30		Personal Property Tax due June 30.  Yes X No
BJORK, ETHEL M. 250 SPRING FOREST AVE JACKSONVILLE FL 32216  11. Pursuant to the provisions of Sections 617.0502 and 617.1503, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its regulation of registered agant, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agant, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agant, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agant, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agant, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agant, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agant, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agant, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agant, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agant, or both, in the State of Change is a statute.  12.		9. Name and Address of Current	Registered Agent			
250 SPRING FOREST AVE JACKSONVILLE FL 32216  28 City FL as Zip Code or registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its rejoined 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, 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, 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, or both, in the State of Florida. Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN INTUITIES.  14. CITY - 57- 2/P  15. COBB, RI CHARD  15.				81	Name	e
JACKSONVILLE FL 32216  83  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 517.0502 and 517.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its recorded and 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, and accept the obligations of, Section 617.0502, Florida Statutes.  SIGNATURE  Signature, typed or prétaderame of registered agent and tits if applicable. (NOTE Registered Agent algoritative required when refroiting)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE  MD  CHRISTY, MICHAEL  12 NAME  CHRISTY, MICHAEL  13 30TH AVENUE SOUTH  13 STREET ADDRESS  133 30TH AVENUE SOUTH  14 ACTIVE TO P  DELETE  DI  DELETE  17 D  DELETE  18 D  18 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  DELETE  22 NAME  12 STREET ADDRESS  CITY-ST-ZIP  JACKSONVILLE FL  32 STREET ADDRESS  STR					Street	t Address (P.O. Box Number is Not Acceptable)
TILE DELETE ADDRESS OF SPRING FOREST AVENUE STREET ADDRESS OFFICE				83		
1. 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 residence 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, and accept the obligations of, Section 617.0503, Florida Statutes.    SIGNATURE   True	JACKS	DIAVILLE PL 32216			1	
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 charging its recifice 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, 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 and the in agent of the corporation's board of directors. I hereby accept the appointment as registered agent and the in agent of the corporation's board of directors. I hereby accept the appointment as registered agent and the interest of the purpose of charging its recification. I hereby accept the appointment as registered agent and the interest of the purpose of charging its recification. In the conficient of the purpose of charging its recification of the corporation's board of directors. I hereby accept the appointment as registered agent and the interest of the purpose of charging its recification. In the conficient of the purpose of charging its recification of the purpose of charging its recification. In the conficient of the purpose of charging its recification of the purpose of charging its recification. In the conficient agent, and the proposed agent and statutes. In the corporation's board of directors. I hereby accept the appointment as registered agent and when retraiting.  DATE  12.				84	City	85 Zip Code
SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN MAKE  CHRISTY, MICHAEL  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN ITILE  CD  COBB, RICHARD  1561 PLANTATION OAKS LANE  1575-21P  JACKSONVILLE FL 32216  22 NAME  13 STREET ADDRESS  CITY-ST-2IP  JACKSONVILLE FL 32216  CITY-ST-2IP  JACKSONVILLE FL 32218  LITILE  DELETE  JACKSONVILLE FL 32218  LITILE  DELETE  JACKSONVILLE, FL 32218  LITILE  JACKSONVILLE, FL 322218  LITILE  JACKSONVILLE, FL 322218  LITILE  JACKSONVILLE, FL 32228  LITILE  JACKSONVILLE, FL 322218  LITILE  JACKSONVILLE, FL 32228  LITILE  JACKSONVILLE, FL 322218  LITILE  JACKSONVIL	11. Pursuant	to the provisions of Sections 617.0502	and 617,1508, Florida Stati	utes, the abov	re-namec	
SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN MAKE  CHRISTY, MICHAEL  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN ITILE  CD  COBB, RICHARD  1561 PLANTATION OAKS LANE  1575-21P  JACKSONVILLE FL 32216  22 NAME  13 STREET ADDRESS  CITY-ST-2IP  JACKSONVILLE FL 32216  CITY-ST-2IP  JACKSONVILLE FL 32218  LITILE  DELETE  JACKSONVILLE FL 32218  LITILE  DELETE  JACKSONVILLE, FL 32218  LITILE  JACKSONVILLE, FL 322218  LITILE  JACKSONVILLE, FL 322218  LITILE  JACKSONVILLE, FL 32228  LITILE  JACKSONVILLE, FL 322218  LITILE  JACKSONVILLE, FL 32228  LITILE  JACKSONVILLE, FL 322218  LITILE  JACKSONVIL	office or a	registered agent, or both, in the State of	of Florida, Such change was	authorized b	y the cor	proration's board of directors. I hereby accept the appointment as registered
Signature, typed or private rame of registered agent and title if applicable.   (NOTE: Registered Agent signature required when retraiting)   DATE		and accept the conge	ions of, deciden on	ionua Statute	·5.	
TITLE  NAME  CHRISTY, MICHAEL  133 30TH AVENUE SOUTH  JACKSONVILLE FL  TITLE  NAME  BJORK, ETHEL  250 SPRING FOREST AVENUE  CITY-ST-ZIP  JACKSONVILLE FL 32216  TITLE  NAME  HENDERSON, WILLIAM M  378 TRET ADDRESS  STREET ADDRESS  CITY-ST-ZIP  ACKSONVILLE FL  TITLE  DELETE  ACKSONVILLE FL  TITLE  PD  DELETE  ACKSONVILLE FL  TITLE  ACKSONVILLE FL  TOTALISE  ACK	SIGNATURE	Signature, typed or printed name of registered agent	t and little if applicable. (NC	OTE: Registered Ag	ent signatur	are required when reinstating) DATE
NAME CHRISTY, MICHAEL STREET ADDRESS CITY-ST-ZIF JACKSONVILLE FL TITLE TD JOBLETE JACKSONVILLE FL TITLE TD JOBLETE JACKSONVILLE FL Z3 TITLE DELETE JACKSONVILLE FL Z3 TITLE DELETE Z3 TITLE Z3 NAME JACKSONVILLE FL Z3 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL Z3 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL Z3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL Z3 NAME JENKINS, EVELYN S3 STREET ADDRESS S3-71 ST ISABEL DR E JACKSONVILLE, FL Z3 Z277 Change W DELETE JACKSONVILLE, FL Z3 NAME JENKINS, EVELYN S3 STREET ADDRESS S3-71 ST ISABEL DR E JACKSONVILLE, FL Z3 NAME JENKINS, EVELYN S3 STREET ADDRESS S4-CITY-ST-ZIP JACKSONVILLE, FL Z3 Z218 Change TITLE DELETE JACKSONVILLE, FL Z3 Z218 Change CITY-ST-ZIP TITLE JELETE JACKSONVILLE, FL Z3 Z218 Change CHANGE STREET ADDRESS CITY-ST-ZIP TITLE JELETE JEL	12.	OFFICERS AND				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
CHRISTY, MICHAEL  STREET ADDRESS  133 30TH AVENUE SOUTH  JACKSONVILLE FL  TID  NAME  BJORK, ETHEL  220 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  VD  ACKSONVILLE FL  TITLE  VD  ACKSONVILLE FL  TITLE  VD  ACKSONVILLE FL  TITLE  VD  ACKSONVILLE FL  STREET ADDRESS  3971 ST. ISABEL DR. E.  JACKSONVILLE FL  32277 Change  ACKSONVILLE FL  32277 Change  ACKSONVILLE FL  32277 Change  ACKSONVILLE FL  32277 Change  ACKSONVILLE FL  TITLE  VD  ACKSONVILLE FL  32277 Change  ACKSONVILLE FL  32277	TITLE	1.1.0	☐ DELETE	1,1 TITLE		CD Change Addition
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NAME BJORK, ETHEL 250 SPRING FOREST AVENUE 23 STREET ADDRESS 250 SPRING FOREST AVENUE 23 STREET ADDRESS 3971 ST. ISABEL DR. E. 24 CITY-ST-ZIP JACKSONVILLE, FL 32277 Change 1 Change 1 Change 2 CITY-ST-ZIP JACKSONVILLE, FL 32277 Change 2 CITY-ST-ZIP JACKSONVILLE, FL 32278 Change 2 CITY-ST-ZIP JACKSONVILLE, FL 32218 Change 2 CITY-ST-ZIP JACKSONVILLE, FL 32258 CITY-ST-ZIP JA				1.4 CMY-	ST-ZIP	LEERNANDINA EL 30307
STREET ADDRESS  CITY-ST-ZIP  JACKSONVILLE FL 32216  TITLE  VD  NAME  HENDERSON, WILLIAM M  STREET ADDRESS  3971 ST. ISABEL DR. E.  JACKSONVILLE, FL 32277 Change   HENDERSON, WILLIAM M  32 NAME  JENKINS, EVELYN  33 STREET ADDRESS  3971 ST. ISABEL DR. E.  JACKSONVILLE, FL 32277 Change   WILLIAM M.  32 NAME  JENKINS, EVELYN  33 STREET ADDRESS  STREET ADDRESS  MAGIC COVE LANE  JACKSONVILLE, FL 32218  TITLE  PD  LOBLETE  4.1 TITLE  VD  AMME  COBB, RICHARD  4.2 NAME  JENKINS, EVELYN  BJORK-KOLLER, INGA R.  12790 WILDERNESS LN. W.  LOTY-ST-ZIP  STREET ADDRESS  LOTY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS  LOTY-ST-ZIP  TITLE  LOBLETE  DELETE  LOBLETE  LOBLE		, ·-	□ DELETE	2.1 TITLE		PD Change Addition
STREET ADDRESS   JACKSONVILLE FL 32216		<u> </u>		2.2 NAME		HENDERSON, WILLIAM M.
TITLE VD DELETE 3.1 TITLE VD STREET ADDRESS 3971 ST. ISABEL DR. E JACKSONVILLE, FL 32277 Change LANGE STREET ADDRESS 3971 ST. ISABEL DR. E JACKSONVILLE FL 3.2 STREET ADDRESS STREET ADDRE			•	2.3 STREE	r address	3971 ST. ISABEL DR. F.
NAME HENDERSON, WILLIAM M  STREET ADDRESS 3971 ST. ISABEL DR. E  CITY-ST-ZIP JACKSONVILLE FL  TITLE PD COBB, RICHARD STREET ADDRESS 1561 PLANTATION OAKS LANE FERNANDINA FL 32304  TITLE NAME STREET ADDRESS STREET ADDR				2. 4 CITY-	ST-ZIP	JACKSONVILLE EL Z2277
STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL  TITLE PD COBB, RICHARD AME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FERNANDINA FL 32304  DELETE JACKSONVILLE, FL 32218  LOCATION ALITHE VD ALITHE BJORK-KOLLER, INGA R. 12790 WILDERNESS LN. W. LOCATION ALITHE LOCATION ALITHE STREET ADDRESS CITY-ST-ZIP FERNANDINA FL 32304  DELETE JELETE STREET ADDRESS CITY-ST-ZIP TITLE LOCATION CHARGE  STREET ADDRESS CITY-ST-ZIP TITLE LOCATION CHARGE  STREET ADDRESS CITY-ST-ZIP TITLE LOCATION CHARGE LOCATION COVE LANE 3.4.CITY-ST-ZIP ALITHE CHARGE COVE LANE SACITY-ST-ZIP CHARGE COVE LANE SACI			L DELETE	3.1 TITLE		VD Change X Addition
CITY-ST-ZIP JACKSONVILLE FL 3.2.218  TITLE PD DELETE 4.1 TITLE VD  NAME COBB, RICHARD 4.2 NAME BJORK-KOLLER, INGA R.  STREET ADDRESS 1561 PLANTATION OAKS LANE FERNANDINA FL 32304 4.4 CITY-ST-ZIP JACKSONVILLE, FL 3.2.258  TITLE JERNANDINA FL 32304 4.4 CITY-ST-ZIP JACKSONVILLE, FL 3.2.258  TITLE JERNANDINA FL 3.3 STREET ADDRESS 5.1 TITLE JChange STREET ADDRESS 6.3 STREET ADDRESS 6.1 TITLE 5.3 STREET ADDRESS 6.4 CITY-ST-ZIP JACKSONVILLE 5.4 CITY-ST-Z				3.2 NAME		
TITLE PD				3.3 STREE	ADDRESS	855 MAGIC COVE LANE
MAME COBB, RICHARD STREET ADDRESS 1561 PLANTATION OAKS LANE FERNANDINA FL 32304  TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STREET ADDRESS CITY-ST-ZIP TITLE DELETE G.1 TITLE Change Ch					ST-ZIP	JACKSONVILLE, FL 32218
STREET ADDRESS CITY-ST-ZIP FERNANDINA FL 32304  1. DELETE 1. DELETE 1. J A C K S O N V I L L E , F L 32258  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 1. DELETE 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Change			☐ DELETE			V D
CITY-ST-ZIP   FERNANDINA FL 32304		•	_	4. 2 NAME		BJORK-KOLLER, INGA R.
TITLE         DELETE         5.1 TITLE         Change         Change           NAME         5.2 NAME         STREET ADDRESS           STREET ADDRESS         5.3 STREET ADDRESS           CITY-ST-ZIP         5.4 CITY-ST-ZIP           TITLE         DELETE         6.1 TITLE	STREET ADDRESS		<u>=</u>	4.3 STREE	ADDRESS	
NAME         5.2 NAME           STREET ADDRESS         5.3 STREET ADDRESS           CITY-ST-ZIP         5.4 CITY-ST-ZIP           TITLE         DELETE         6.1 TITLE		FERNANDINA FL 32304			T- ZIP	
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TITLE DELETE 6.1 TITLE Change						
			T Select		T-ZIP	
NAME 6,2 NAME			☐ DELETE			L Change L Addition
	NAME			6.2 NAME		

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:

LETTY ( BUDE B) TOTHE EM. BJORK

2/2/98

904-398-8175

**FILED** 

Feb 06 1998 8:00am

Secretary of State

CR2E037 (10/97)