## 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 SINDIPARCHIO TO NOISIVID

**DOCUMENT # P18087** 

**(7)** 

## **FILED** May 18 1998 8:00am Secretary of State

VON B	ERGEN, LTD. CORPORATIO	N								
Principal Plac	e of Business	Mailing Address				-{ 1 140/1100/1001 101 (0/11/001) 00/11/10/11	El Bibil Olf	ILI ANDII RIĞIN EN	INL MEDEL TONE	
400 W. ROMANA STREET 400 W. ROMANA STREET PENSACOLA FL 32533 PENSACOLA FL 32533							T. 110	20005		
						DO NOT WRITI	E IN THIS	S SPACE		ר
			<del></del> -		<u>-</u>	3. Date Incorporated or Qualified 02/22/1988				
2. Principal P	2. Principal Place of Business 28. Mailing Addre								oplied For	1
21		26				63-0783313			iot Applicable	1
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required	
City & Stat	ė	City & State				6. Etection Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip	Country	Zip	Cou	intry		This corporation owes or has p.				┨
24	25	29	30			Personal Property Tax due June			∏ No	
	9. Name and Address of Curren		100		<del></del> -	10. Name and Address of New Re				1
QU	INA. CARTER			81 N	lame					1
400 W ROMANA ST				82 5	troot Addro	ess (P.O. Box Number is Not Accepta	blal			-
PENSACOLA FL 32501				02	oneer Addre	ess (F.O. Box Number is Not Accepta	Di <del>e</del> )			İ
			İ	83						1
				84 C	City				Codo	-
					/ity		FL	_ <b>85</b> Zip	Code	ĺ
office or r	to the provisions of Sections 607.050/ egistered agent, or both, in the State in familiar with, and accept the obligation	of Florida. Such change was a utions of, Section 607.0505, Flo	authorizad orida Stat	d by the utes.	e corporatio	on's board of directors. I hereby acce	pt the ap	opointment as	registered	
12.				tered Agent signature required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR					DC INL 12	18
TOTLE	PVD	DELETE		11 TITLE		ADDITIONS/CHANGES TO GET	CLIS AN	Change	Addition	10/01
NAME	VON BERGEN, ED			1.2 HAME				Onlings		1
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CITY-ST-ZIP	PENSACOLA FL			TY-ST-ZI	i					200
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NAME	QUINA, CARTER	_		2.2 NAME						
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CITY-ST-ZIP	PENSACOLA FL			TY-ST-Z	i					
TITLE	TD	DELETE	3.1 T T					Change	Addition	1
NAME	STEVENS, ROSE		3.2 NA	ME	- 1					Į
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CITY-ST-ZIP	PENSACOLA FL		34 (1	TY-ST-Z	IP					]
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CITY-ST-ZIP			4.4 CITY - ST-		P					]
TITLE		☐ DELETE	5.1 Ti <sup>rr</sup>	5.1 TITLE				Change	☐ Addition	
NAME			5.2 N/,ME						ļ	
STREET ADDRESS			1	REET ADD	i i					
CITY-ST-ZIP		Floriere		Y-ST-ZI	<u> </u>					ļ
TITLE		[_] DELETE	6.1 7/1		l			Change	Addition	
NAME			6.2 NA							
STREET ADDRESS				reet add	- 1					
CITY-ST-ZIP	ertify that the information supplied wit	h this filling door not qualify to		Y-ST-ZII		action 110 07(3)(i) Florido Statutos I	further o	artifu that 1-	information	1
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april 30, 1998 850-433 5575