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

FILED
Apr 06 1998 8:00am
Secretary of State

DOCUMENT # **P93000001705 (1)**

1. Corporation Name
~~MONACO & MONACO, P.A.~~
12-3-97
MONACO, MONACO & BIRDER, P.A. (Name change filed)

Principal Place of Business
901 NW 57TH STREET
GAINESVILLE FL 32605

Mailing Address
901 NW 57TH STREET
GAINESVILLE FL 32605

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/01/1993

4. FEI Number
59-3159252
Applied For ☐
Not Applicable ☐

2. Principal Place of Business		2a. Mailing Address		4. FEI Number	
21		26			
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
City & State 23		City & State 28		6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

MONACO, TOBY S
901 NW 57TH STREET
GAINESVILLE FL 32605

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City FL	85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE **PD** ☐ DELETE		1.1 TITLE	☐ Change ☐ Addition
NAME **MONACO, TOBY S**		1.2 NAME	
STREET ADDRESS **5001 NW 62ND TERRACE**		1.3 STREET ADDRESS	
CITY-ST-ZIP **GAINESVILLE FL**		1.4 CITY-ST-ZIP	
TITLE **SD** ☐ DELETE		2.1 TITLE	☐ Change ☐ Addition
NAME **MONACO, LYNN E**		2.2 NAME	
STREET ADDRESS **5001 NW 62ND TERRACE**		2.3 STREET ADDRESS	
CITY-ST-ZIP **GAINESVILLE FL**		2.4 CITY-ST-ZIP	
TITLE ☐ DELETE		3.1 TITLE V/D	☐ Change ☑ Addition
NAME		3.2 NAME BIRDER, DUDLEY	
STREET ADDRESS		3.3 STREET ADDRESS 3653 NW 80TH LANE	
CITY-ST-ZIP		3.4 CITY-ST-ZIP Gainesville, Fl 32653	
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		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	PC 4-6
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE ☐ DELETE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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CR2E034 (10/97)

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE _____   TOBY S MONACO   Pres   4/1/98