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

PROFIT **CORPORATION** ANNUAL REPORT

1998

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supplied with this

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED**

May 05 1998 8:00am

Secretary of State

P93000016869 (8) DOCUMENT #

1. Corporation Name

EMERSON ACORN, INC. Principal Place of Business Mailing Address 3728 PHILLIPS HWY 3728 PHILLIPS HWY **SUITE 39** SUITE 39 DO NOT WRITE IN THIS SPACE JACKSONVILLE FL 32207 JACKSONVILLE FL 32207 3. Date Incorporated or Qualified 03/01/1993 2. Principal Place of Business 2a, Mailing Address FEI Number Applied For 21 <u>59-3175588</u> Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zω 8. This corporation owes or has paid the current year Intangible 30 24 29 Personal Property Tax due June 30. Yes 25 g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name PHILLIPS JR., PHILIP B 3728 PHILLIPS HWY 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 39 JACKSONVILLE FL 32207 83 84 City 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or profed name of registered agent and the if applicable (NOTé Registered Agont signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition Change TITLE 1.1 TITLE PHILLIPS JR, PHILIP B 1.2 NAME NAME 3728 PHILLIPS HWY 39 STREET ADORESS 1.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE 2.1 TITLE Change Addition TITLE PHILLIPS, MARY K NAME 2.2 NAME 3728 PHILLIPS HWY #39 STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADORESS CITY-ST-ZIP 3.4. CITY - \$T - ZIP DELETE Change ☐ Addition 4.1 TITLE TITLE NAME **4.2 NAME** STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Addition DELETE Change TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST- ZIP filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of the exemption is tritle and accurate and that my signature shall have the same legal effect as if made under oath; that I am an injustice europewered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in with any appears. 14. I hereby certify that the information indicated on this annual report of officer or director of the corporal Block 12 or Block 13 if changed