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

DOCUMENT #

P93000017929 (9)

FILED Jan 30 1998 8:00am Secretary of State

1. Corporation Name COPY-N-LAW, INC.	
Principal Place of Business Mailing Address	
-100 N. TAMPA ST. % RICHARD COTTER	
STE 1945 6100 ESTER BLVD.	
TAMPA FL 33802 FT MYERS BEACH FL 33931 DO NOT WRITE IN TH	IS SPACE
US Jate Incorporated or Qualified 03/09/1993	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For
21 100 W. KENNEDY BLVD. 26 65-0400703	Not Applicable
Suite, Apr. #, etc.	\$8.75 Additional
22 Suite 708 27	Fee Required
City & State Function Campaign Financing Trust Fund Contribution	\$5.00 May Be
	Added to Fees
219 Country 219 Country 8. This corporation owes or has paid the 24 33602 25 Hill 80 Rous A29 30 Personal Property Tax due June 30.	current year Intangible
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered	/
COTTER, RICHARD T 81 Name	
RION ESTERN RIVIN	
FORT MYERS BEACH FL 33931	
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 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	of changing its registered ppointment as registered
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 A	
TITLE DPST DELETE 1.1 TITLE	Change Addition
NAME TREON, NANCY 1.2 NAME	[:
STREET ADDRESS 14972 HICKORY GREEN COURT 1.3 STREET ADDRESS	15
CITY-ST-ZIP FT. MYERS BEACH FL 2.0 14 CITY-ST-ZIP FT. MYERS, FL 339.	
TITLE VPT DELETE 21 TITLE	12
TREON DATRICK I	Change
NAME TREON, PATRICK L. 22 NAME	Z Change
STREET ADDRESS 14972 HICKORY GREEN CT 22 STREET ADDRESS	Change Addition
STREET ADDRESS CITY-ST-ZIP 14972 HICKORY GREEN CT 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3339	7/2
STREET ADDRESS CITY-ST-ZIP TITLE 14972 HICKORY GREEN CT 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3339	La Change La Abdition
STREET ADDRESS CITY-ST-ZIP TITLE NAME 14972 HICKORY GREEN CT 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3339 DELETE 3.1 TITLE 3.2 NAME	7/2
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 14972 HICKORY GREEN CT 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 33 STREET ADDRESS 3.1 TITLE 32 NAME 33 STREET ADDRESS 33 STREET ADDRESS	7/2
STREET ADDRESS CITY-ST-ZIP FT MYERS FL Z-ID DELETE 3.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 3.3 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.5 STREET ADDRESS 3.4 CITY-ST-ZIP	7/2 Change Addition
STREET ADDRESS 14972 HICKORY GREEN CT 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 33 5 7	7/2
STREET ADDRESS 14972 HICKORY GREEN CT 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 33 5 7	7/2 Change Addition
STREET ADDRESS	7/2 Change Addition
STREET ADDRESS CITY-ST-ZIP FT MYERS FL Z-ID DELETE 3.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP 4.5 STREET ADDRESS CITY-ST-ZIP 4.6 CITY-ST-ZIP 4.7 STREET ADDRESS CITY-ST-ZIP 4.7 CITY-ST-ZIP	Change Addition
STREET ADDRESS 14972 HICKORY GREEN CT 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 33 59	7/2 Change Addition
STREET ADDRESS 14972 HICKORY GREEN CT 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 33.59	Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Change Addition
STREET ADDRESS 14972 HICKORY GREEN CT 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 33 59	Change Addition Change Addition Change Addition
STREET ADDRESS	Change Addition
STREET ADDRESS 14972 HICKORY GREEN CT 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 33 59	Change Addition Change Addition Change 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 logal 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.