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 # P93000024370 (7)

FLORIDA STATEWIDE REALTY, INC.

FILED Mar 12 1998 8:00am Secretary of State

NAME WELCH, CHARLES R. 12 NAME 12 NAME 12 NAME 13 STREET ADDRESS 13 STREET ADDRESS 14 STREET ADDRESS 15 STREET ADDRESS 16 STREET ADDRESS 16 STREET ADDRESS 17 NAME 18 STREET ADDRESS 18 STREET	cable hal
SON RANDIA DR JACKSONVILLE FL 32210 US 2. Principal Piaco of Businoss 3. Date Incorporated or Qualified 3. Principal Piaco of Businoss 3. Date Incorporated or Piaco of Status Desired 3. Principal Piaco of Businoss 3. Date Incorporated or Piaco of Status Desired 3. Principal Piaco of Status Desired 3. Certificate of Status Desired 4. Fell Number 3. Certificate of Status Desired 4. Fell Number 5. Country 5. Country 6. Election Campaign Financing 6. Ele	cable hal
DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 03/29/1993 4. Fill Number Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State City & State Applied Trust Fund Contribution Added to Fer Trust Fund Contribution Added to Fer Require Applied Trust Fund Contribution Added to Fer Trust Fund Contribution Added to Fer	cable hal
3. Date Incorporated or Qualified 03/29/1993 2. Principal Piaco of Business 2. Applied 2. Principal Piaco of Business 2. Applied 3. Date Incorporated or Qualified 03/29/1993 3. Fill Number Applied 3. Applied 3. Applied 3. Applied 3. Applied 3. Applied 3. Not Applied 3. Not Applied 3. Not Applied 3. Certificate of Status Dasired 3. Suite, Apt. #, etc. 3. Certificate of Status Dasired 3. Set Bellow Comparign Financing 3. Added to Fe 3. Election Campaign Financing 3. Trust Fund Contribution Added to Fe 3. Trust Fund Contribution Added to Fe 3. Applied 3. Trust Fund Contribution Added to Fe 3. Name and Address of Current Registered Agent 3. Name and Address of New Registered Agent 3. Name and Address of New Registered Agent 4. Fill Name 4. Trust Fund Contribution Added to Fe 4. Personal Property Tax due June 30. Yes No Name and Address of New Registered Agent 4. Fill Name 4. Trust Fund Contribution 5. Certificate of Status Dasired 6. Election Campaign Financing 5. Trust Fund Contribution 6. Election Campaign Financing 5. Trust Fund Contribution 6. Election Campaign Financing 6.	cable hal
2. Principal Piaco of Businoss 2. Mailing Address 3. FEI Number 4. FEI Number 5. Not APPLICABLE 5. Certificate of Status Desired 5. Certificate of Status Desired 7. Cell & State 7. Country 8. Trust Fund Contribution 7. Country 8. Trust Fund Contribution 7. Country 8. Trust Fund Contribution 7. Country 8. This corporation owes or has paid the current year Intangit 7. Country 8. This corporation owes or has paid the current year Intangit 7. Country 8. This corporation owes or has paid the current year Intangit 7. Country 8. This corporation owes or has paid the current year Intangit 7. Country 8. This corporation owes or has paid the current year Intangit 7. Country 8. This corporation owes or has paid the current year Intangit 8. Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent 8. Name 8. Street Address (P.O. Box Number is Not Acceptable) 8. Street Address (P.	cable hal
2. Principal Place of Business 26 Mailing Address 4. FEI Number NOT APPLICABLE Not Applied	cable hal
Suite, Apt. #, ctc. Suite, Apt. #, etc.	cable hal
Suite, Apt. #, otc. Suite, Apt. #, etc. Special content of the provisions of Socious B07.05:02 and 607.15:08. Florida Statutes the above-named corporation submits this statement for the purpose of changing its registered agent. Apt. A	e tered
City & State Country	tered
City & State Country Added to Fee Trust Fund Contribution Added to Fee Trust Fund Contribution Added to Fee Country B. This corporation owes or has paid the current year Intangite Personal Property Tax due June 30. Yes Name Personal Property Tax due June 30. Yes No No Name and Address of Current Registered Agent Name B1 Name B2 Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) 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 reg office or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its reg office or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its reg office or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent ag	e i
Trust Fund Contribution Added to Fer Zip Country Zip Country B, This corporation owes or has paid the current year Intangit Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent WEICH, CHARLES R 6204 RANDIA DR JACKSONVILLE FL 32210 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 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 agent, or both, in the State of Florida. Such change was unulnoinged by the corporation's board of directors. I hereby accept the appointment as registagent. I am familiar with, and accept the obligations of Section 607.0504 Florida Statutes SIGNATURE Signature type to perfect fund for the particular of Post Control of	tered
Zip Country Zip Country Zip Country B. This corporation owes or has paid the current year Intangit Personal Property Tax due June 30. Yes No No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WELCH, CHARLES R 6204 RANDIA DR JACKSONVILLE FL 32210 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Frorida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Such change was nuthorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0595 Florida Statutes. SIGNATURE Signature, typical or period name of registered agent and for it opt 4x and 10. NOTE Registered Agent algorithm required when reinstating) 12. OF LICE RS AND DIRECTORS IN TITLE PTD DEFTE 11. TITLE NAME WELCH, CHARLES R. 200 RANDIA DRIVE	tered
25 29 30 Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent WELCH, CHARLES R 6204 RANDIA DR JACKSONVILLE FL 32210 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 11. Pursuant to the provisions of Soctions 607.0502 and 607.1508. Florida Statutes the above-named corporation submits this statement for the purpose of changing its reg office or registered agent, or both, in the State of Florida. Such change was nuthorized by the corporation's board of directors. I hereby accept the appointment as regis agent. I am family ar with, and accept the obligations of, Section 607.0505 Florida Statutes SIGNATURE Signature, typed or protect name of registered agent and the obligations of, Section 607.0505 Florida Statutes 12. OFFICE RS AND DIRECTORS IN DELITE 1.1 TITLE WELCH, CHARLES R. 6204 RANDIA DRIVE	tered
9. Name and Address of Current Registered Agent WELCH, CHARLES R 6204 RANDIA DR JACKSONVILLE FL 32210 81 Name 62 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuant to the previsions of Sections 607.0502 and 607.1508. Florida Statutes the above-named corporation submits this statement for the purpose of changing its region office or registered agent, or both, in the State of Florida. Such change was numberized by the corporation's board of directors. I hereby accept the appointment as registagent. I am familiar with, and accept the obligations of, Section 67.0505 Florida Statutes SIGNATURE Signature, typed or product connect registered agent	
WELCH, CHARLES R 6204 RANDIA DR JACKSONVILLE FL 32210 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 reg office or registered agent, or both, in the State of Florida. Such change was numberized by the corporation's board of directors. I hereby accept the appointment as regis agent. I am family ar with, and accept the obligations of, Section 697.0505 Florida Statutes SIGNATURE Signature, typical or pedestrained of registered agent and face it opision for the purpose of changing its registered gent signature required when reinstating) OAT 12. OFFICE RS AND DIRECTORS IN TITLE PTD DELITE 1.1 TITLE WELCH, CHARLES R. 6204 RANDIA DRIVE 1.2 NAME 1.2 NAME 1.3 TIBLE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.3 TIBLE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.4 STREET ADDRESS 1.5 TIBLE ADDRESS 1.6 TIBLE ADDRESS 1.6 TIBLE ADDRESS 1.7 NAME 1.8 TIBLE ADDRESS 1.8 TIBLE ADDRESS 1.9 NAME 1.9 NAME 1.9 NAME 1.1 TIBLE ADDRESS 1.1 TIBLE ADDRESS 1.2 NAME 1.3 TIBLE ADDRESS 1.3 TIBLE ADDRESS 1.4 TIBLE ADDRESS 1.5 TIBLE ADDRESS 1.6 TIBLE ADDRESS 1.7 NAME 1.8 TIBLE ADDRESS 1.8 TIBLE ADDRESS 1.9 NAME 1	
Street Address (P.O. Box Number is Not Acceptable) 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 reporting of the purpose of changing its reporting agent. I am familier with, and accept the obligations of, Section 607.0535 Florida Statutes. Signature, typical or period and of reported and fact trapple and modifier of applications of the provision of the purpose of changing its report of the purpose of changing its report of the purpose of the provision of the purpose of changing its report of the purpose of the purpose of changing its report of the purpose of the purpose of changing its report of the purpose of changing its report of the purpose of the purpose of changing its report of the purpose of the purpose of changing its report of the purpose of the purpose of changing its report of the purpose	
JACKSONVILLE FL 32210 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its reporting of the purpose of changing its reporting agent. Lam families with, and accept the obligations of, Section 607,0505 Florida Statutes. SIGNATURE Signature, typical or prefer families and fact trapple and fact trapped an	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its reprofice or registered agent, or both, in the State of Florida. Such change was nuthorized by the corporation's board of directors. I hereby accept the appointment as registagent. I am familier with, and accept the obligations of, Section 607,0505 Florida Statutes. SIGNATURE Signature, typical or prefer familier and fact tropple and modification of the provision of the provision of the provision of the purpose of changing its reprofice of the provision of the purpose of changing its reprofice of the purpose of the purpose of changing its reprofice of the purpose of the purpose of changing its reprofice of the purpose of the purpose of changing its reprofice of the purpose of the pu	
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 reg office or registered agent, or both, in the State of Florida. Such change was nuthorized by the corporation's board of directors. I hereby accept the appointment as registated. SIGNATURE Signature, typical or peoples agent and to a transplantation of the provision of the purpose of changing its reg of the corporation's board of directors. I hereby accept the appointment as registated sent signature required when reinstating) 12. OF LICERS AND DIRECTORS IN TITLE WELCH, CHARLES R. WELCH, CHARLES R. 6204 RANDA DRIVE 6204 RANDA DRIVE 12. STREET ADDESS.	
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 reg office or registered agent, or both, in the State of Florida. Such change was nuthorized by the corporation's board of directors. Thereby accept the appointment as registagent. I am families with, and accept the obligations of, Section 697.0505 Florida Statutes. SIGNATURE Signature type of or pended name of registered agent and for it apple with a composition of the corporation's board of directors. Thereby accept the appointment as registagent agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS IN TITLE PTD DELETE 1.1 TITLE WELCH, CHARLES R. 1.2 NAME 4.004 RANDA DRIVE	
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 report of the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its report of the provisions o	
office or registered agent, or both, in the State of Florida. Such change was nuthorized by the corporation's board of directors. Thereby accept the appointment as registagent. I am familiar with, and accept the obligations of, Section 607.0505 Florida Statutes SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE NAME WELCH, CHARLES R. 1.2 NAME WELCH, CHARLES R. 1.3 NAME WELCH, CHARLES R. 1.4 TITLE 1.5 TIPLET ADDRESS CAPACIAN STATEST AD	
SIGNATURE Signature, typed or period name of registered agent and tide in applicable (NOTE Registered agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE NAME WELCH, CHARLES R. 12 NAME WELCH, CHARLES R. 13 NAME WELCH, CHARLES R. 14 TITLE 15 THEET ADDRESS 16 THEET ADDRESS 16 THEET ADDRESS 17 THEET ADDRESS 18 THEET ADR	
12. OF ICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE PTD WELCH, CHARLES R. 12. NAME WELCH, CHARLES R. 12. NAME WELCH, CHARLES R. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE PTD 14. THE PTD 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Change WELCH, CHARLES R. 15. NAME 16. NAME 17. NAME 18. CHARLES R. 19. NAME 19. THEST ADDRESS 19. CHARLES R. 19. THEST ADDRESS 19. THEST ADDRESS 19. THE PTD 19.	
12. OF ICERS AND DIRECTORS TITLE PTD NAME WELCH, CHARLES R. LE Charles R. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PT/D/S LE Charles R. 12 NAME 12 NAME 13 NAME 14 TITLE PT/D/S 15 TITLE PT/D/S 16 Charles R. Welch 16 TITLE PT/D/S 17 TITLE PT/D/S 18 TITLE PT/D/S 18 TITLE PT/D/S 19 TITLE PT/D/S 19 TITLE PT/D/S 10 TITLE PT/D/S	, 1 .
TITLE PTD DELFTE 11 TITLE PTD/S LE Change LE C	- I
NAME WELCH, CHARLES R. STREET ADDRESS 6204 RANDIA DRIVE 1.2 NAME 1.2 NAME 1.3 STREET ADDRESS 1.3 STREET ADDRESS 1.4 NAME 1.5 NAME 1.5 NAME 1.5 NAME 1.7 NAME 1.8 NAME	2 ddition
STREET ADDRESS 6204 RANDIA DRIVE 1.3 STREET ADDRESS 5689 KIMBECTI DE N.	I.
	1
CITY-ST-ZIP JACKSONVILLE FL 14 CITY-ST-ZIP JACKSONVILLE, FL 322/0	l l
TITLE S DELETE 21 TITLE Change	ddition
NAME WELCH, SANDRA F. 22 NAME	
STREET ADDRESS 5639 KIMBRELL DRIVE NORTH 2.3 STREET ADDRESS	
CITY-ST-ZIP JACKSONVILLE FL 2.4 CITY-ST-ZIP	
	ddition
NAME WALTERS, MALCOM G. 3.2 NAME	1
STREET ADDRESS 74010 VAN DYKE ROAD 3.3 STREET ADDRESS	
CHY-ST-ZIP ODESSA FL. 34 CLY-ST-ZIP	
	ddition
NAME WALTERS, KEVIN C. 4.2 MVE	
STREET ADDRESS 23 12 WEST ROBSON STREET 4.3 STREET ADDRESS 4.3 STREET ADDRESS	
CITY-ST-ZIP TAMPA FL 4.4 CITY-ST-ZIP	
	ddition
NAME 5.2 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	
CITY-ST-ZIP 5.4 CITY-ST-ZIP	
	ddition
NAME 6.2 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	
CITY_S1_7IP 64 CBY_S1_7IP	
14. I hereby certify that the information supplied with this filing does not qualify for the examption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information on this annual report as supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I among the control of the same legal effect as if made and the more control of the same legal effect as if made and the same legal effect as if	