3-12-98 B3169 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000026847 (2) **DOCUMENT #**

FILED Mar 12 1998 8:00am Secretary of State

DALLAS PARK, INC. Principal Place of Business Mailing Address 495 72 AVE. NORTH 495 72 AVE. NORTH ST. PETERSBURG FL 33702 ST. PETERSBURG FL 33702 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/12/1993 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 59-3185441 Suite, Apt. #, etc. Suite Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Ζip Country This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. Yes 29 24 30 Name and Address of New Registered Agent g. Name and Address of Current Registered Agent 81 Name CORPORATION INFORMATION SERVICES INC. 1201 HAYS ST. 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or ported name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition TITLE 1.1 TITLE Change DALLAS, WILLIAM S NAME 1.2 NAME STREET ADDRESS 495 72ND AVE. NORTH 1.3 STREET ADDRESS ST. PETERSBURG FL 33702 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE DALLAS, AN CHA NAME 2.2 NAME STREET ADDRESS 495 72ND AVE. NORTH 2.3 STREET ADDRESS ST. PETERSBURG FL 33702 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition Change TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-S1-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TIFLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. 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: