2. 26. 98 B 2549 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000050748 (1)

J.W. DONIGAN, INC.

FILED Feb 26 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 2831 N FEDERAL HIGHWAY 2831 N FEDERAL HIGHWAY **BOCA RATON FL 33431-7785** BOCA RATON FL 33431-7785 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/20/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0425539 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 26 Trust Fund Contribution Added to Fees Zip Country Zio Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. □ No 25 29 30 Yes 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name DONIGAN, J W 2831 N FEDERAL HIGHWAY 82 Street Address (P.O. Box Number is Not Acceptable) BOCA RATON FL 33431-7785 83 84 City Zip Code 85 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 (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change NAME DONIGAN, J W 1.2 NAME STREET ADDRESS 2831 N FEDERAL HIGHWAY 1.3 STREET ADDRESS **BOCA RATON FL 33431-7785** CITY-ST-7IP 1.4 CITY-ST-ZIP DELETE TITLE Change Addition 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-2IP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME **STREET ADDRESS** 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELFTE TITLE 5.1 TITLE Change Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE 61 TITLE Change ■ Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP

14. Thereby 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 coerciver or trustee emplowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or filiosk 13 if changed or on an attachment with an address.