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Mar 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000055353 (5)
 1. Corporation Name
JLH MANAGEMENT CORP.



Principal Place of Business 3647 CORTEZ ROAD W BRADENTON FL 34210 US	Mailing Address 3647 CORTEZ ROAD W BRADENTON FL 34210 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	30 Country

3. Date Incorporated or Qualified 08/06/1993	
4. FEI Number 65-0369120	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CONRAD, RICHARD T
 3647 CORTEZ ROAD W.
 BRADENTON FL 34210**

10. Name and Address of New Registered Agent

81 Name **Thomas B. Luzier**
 82 Street Address (P.O. Box Number is Not Acceptable)
2440 N. Tamiami Trail
 83
 84 City **Nokomis** FL 85 Zip Code **34275**

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]* **Thomas B. Luzier, VP** DATE **1/26/98**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS

TITLE	SDR	<input checked="" type="checkbox"/> DELETE
NAME	CONARD, BETTY A	
STREET ADDRESS	3647 CORTEZ ROAD W	
CITY - ST - ZIP	BRADENTON FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CONARD, RICHARD	
STREET ADDRESS	3647 CORTEZ ROAD W	
CITY - ST - ZIP	BRADENTON FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President/CEO	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	John F. Zoberatt	
1.3 STREET ADDRESS	2440 N. Tamiami Trail	
1.4 CITY - ST - ZIP	Nokomis, FL 34275	
2.1 TITLE	v.p. Secretary	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Thomas B. Luzier	
2.3 STREET ADDRESS	2440 N. Tamiami Trail	
2.4 CITY - ST - ZIP	Nokomis, FL 34275	
3.1 TITLE	CFO	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Michael W. Morahan	
3.3 STREET ADDRESS	2440 N. Tamiami Trail	
3.4 CITY - ST - ZIP	Nokomis, FL 34275	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

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 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: *[Signature]* **Thomas B. Luzier, VP** DATE **1/26/98** **941-966-7636**

CFR2E034 (10/97)