FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 21 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000057265 (9)

CRAIGELLACHIE INC.						2 2001000 410 20100 13011 00111 0012E 90	CELL ROLLE LEFT	()	(2 81 1 07) 1 81 1
Principal Place of Business Mailing Address							illi kale i bili	E 14 0E0 11010 DE	TEF EFLICTER
13000 RUNNING WATER RD. 13600 RUNNING WATER R				D ···					
PALM BEACH GARDENS FL 33418 PALM BEACH GARDENS			FL 3341	FL 33418		DO NOT WRITE	iki wane	20405	
US		US				3. Date Incorporated or Qualified	. IN THIS S	SPACE	
						1			
2. Principal F	Place of Business	2a. Mailing Address	a. Mailing Address			08/13/1993 4. FEI Number			oplied For
21		26			65-0473432		<u> </u>	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.								\$8.75	
22		27				5. Certificate of Status Desired			equired
City & State		City & State				6. Election Campaign Financing		\$5.00	May Be
23	28				Trust Fund Contribution		Added 1		
Zip	Country	Zip	Cou	intry		8. This corporation owes or has pa	ld the curi	rent year Int	angible
24	25	29	30			Personal Property Tax due June] No
	 Name and Address of Current 	Registered Agent				10. Name and Address of New Re	gistered A	Agent	
l 10	HNSON, GRANT W			81 Name	:				.
13600 RUNNING WATER RD.				82 Street	Addres	ss (P.O. Box Number Is Not Acceptab	ile)		(
PA	LM BEACH GARDENS FL 33418								
				83					
				84 City				85 Zip (Code
							FL		
11. Pursuant office or a	to the provisions of Sections 607.0502 registered agent, or both, in the State o im familiar with, and accept the obligat	and 607.1508, Florida Statut f Florida, Such change was :	es, the al	ove-named	d corpor	ration submits this statement for the p	urpose of	changing it	s registered
agent. I a	im familiar with, and accept the obligat	ions of, Section 607.0505, Fl	orida Stat	utes.	poration	119 DOME OF CHECKIS. THEREBY ACCEP	it tile abbe	Million as	registered
SIGNATURE									
40	Signature, typed or printed name of registered agent OFFICERS AND			Agent signature	e required	when reinstating)	DATE		
12. TITLE	D OFFICENS AND	DIRECTORS DELETE	13.	n e	Т	ADDITIONS/CHANGES TO OFFIC		Change	S IN 12
NAME	JOHNSTON, THOMAS S		1.1 N					- Onange	Li Addition
STREET ADDRESS	13600 RUNNING WATER RD.			reet address					
CITY - ST - ZIP	PALM BEACH GARDENS FL			TY-ST-ZIP					<u> </u>
TITLE	TACM BEACH GAMBEROTE	DELETE	2.1 TG					Change	Addition
NAME			2.2 NA				,	01,00,190	
STREET ADDRESS				REET ADDRESS					[
CITY-ST-ZIP				TY-ST-ZIP					
TITLE		DELETE	3.1 TIT		-			Change	Addition
NAME			3.2 NA		1				
STREET ADDRESS			3.3 ST	REET ADDRESS					
CITY-ST-ZIP			3.4. C	TY-ST-ZIP					
TITLE		DELETE	4.1 TiT					Change	Addition:
NAME			4. 2 N/	IME					
STREET ADDRESS			4.3 ST	REET ADDRESS					•
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP					
TITLE		DELETE	5.1 TIT	LE				Change	Addition
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET ADDRESS					1
CITY-ST-ZIP			5,4 CIT	Y-ST-ZIP					
TITLE		DELETE	6.1 TIT	LE			1	Change	Addition
NAME			6.2 NA	ME	1				
STREET ADDRESS			6.3 ST	REET ADDRESS	1				
0177 07 710					1				

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.