## 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 # P93000065097 (6)

Principal Place of Business	Mailing Address				
4414 SEVILLA ST. TAMPA FL 33829	4414 SEVILLA ST. TAMPA FL 33629				

**FILED** Apr 22 1998 8:00am Secretary of State

I I II I	EFFERSON LAND COMPAR	(1					
Principal Plac	ce of Business	Mailing	Address				
4414 SEVILLA	A ST.	4414 SI	EVILLA ST.				
TAMPA FL 3			FL 33629				DO NOT WRITE IN THIS ARMOR
							DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
							09/17/1993
2. Principal i	Place of Business	2a. Maile	ng Address				4. FEI Number Applied For
21		26					<b>59-3205436</b> Not Applicable
Suite, Apt	. #, etc.	Suite	. Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22		27					Fee Required
City & Sta	10		& State				6. Election Campaign Financing \$5.00 May Be
Zip	Country	<b>28</b> Ζιρ		Cou	entry.		Trust Fund Contribution Added to Fees
24	25	29		30	nury		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
<u> </u>	g, Name and Address of Curre		Agent	1301			10. Name and Address of New Registered Agent
SA	NDRIDGE, HALA A				81	Name	
	1 EAST KENNEDY BLVD.				82	Stroot Addro	ess (P.O. Box Number is Not Acceptable)
	IITE ₹1700				"	Jucel Varie	555 (F.O. BOX NUMBER'S NOT ACCEPTABLE)
	MPA FL 33602				83		
					84	City	85 Zip Code
						·	<b>►L</b>     `
11. Pursuant office or	to <b>the</b> provisions of Sections 607.05 registered agent, or both, in the Stat	502 and 607.150 to of Florida. Su	08, Florida Statut ich change was	tes, the at authorized	ove-	named corporation	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
agent. I e	am familiar with, and accept the obli	gations of, Sect	ion 607.05 <b>0</b> 5, FI	orida Stat	utes.	ano oonporane	one board of directors. Thereby decept the appointment as regarded
SIGNATURE	Signature, typed or printed name of registered a	ere alla arrese					
12.		ND DIRECTORS		13.	Ageni	l signature required	d when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		DELETE	1.1 101	TLE		Change Addition
NAME	\$ANDRIDGE, THOMAS J III			1.2 NA	ME		_ · _
STREET ADDRESS	4414 SEVILLA ST.			1.3 ST	REET A	DDRESS	
CITY-ST-ZIP	TAMPA FL 33629			1.4 CI	1Y-S1-	ZIP	
TITLE	Ō		DELETE	2.1 111	LE		Change Addition
NAME	<b>SANDRIDGE</b> , HALA A			2.2 NA	ME		
STREET ADDRESS	4414 SEVILLA ST.			2.3 ST	REET A	DDRESS	
CITY-ST-ZIP	TAMPA FL 33629		- <del> </del>	2 4 CI		- ZIP	
TITLE			☐ DELETE	3.1 TIT			Change Addition
NAME				3.2 NA			
STREET ADDRESS				1		DDRESS	
CITY-ST-ZIP TITLE			DELETE	3.4 CI 4.1 TiT		- ZIP	☐ Change ☐ Addition
NAME			occor				C change
STREET ADDRESS				4. 2 NA		DORESS	
CITY-ST-ZIP					ry-st-	1	
TITLE			DELETE	5.1 TIT			☐ Change ☐ Addition
NAME	- 10 - 2			5.2 NA			
STREET ADDRESS				5.3 ST	REET AC	ODRESS	
CITY-ST-ZIP	1			5.4 CIT	Y-\$T-	ZIP	
TITLE			DELETE	6.1 7(7	LĒ		Change Addition
NAME				6.2 NA	ME		
STREET ADDRESS				6.3 STF	REET AE	DDRESS	
CITY_CT_7IP				C 4 CIT	V PT	TID	

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 suppliemental 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 an attachment with an address.