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

**PROFIT CORPORATION ANNUAL REPORT** 

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P9300066533 (9)

ADVANTAGE COURTS, INC.

Mailing Address PO BOX 300008 FERN PARK FL 32730

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



Principal Place of Business **693 GLADWIN DRIVE** FERN PARK FL 32730 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/22/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3202927 Not Applicable 26 Suite, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible ☐ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LECLAIR, RONALD E **693 GLADWIN DRIVE** 82 Street Address (P.O. Box Number is Not Acceptable) FERN PARK FL 32730 В3 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition TITLE 1.1 TITLE Change LECLAIR, RONALD E NAME 1.2 NAME 663 GLADWIN DRIVE STREET ADDRESS 1.3 STREET ADDRESS FERN PARK FL 32730 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME 2 2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2 4 City-St-ZIP DELETE TITLE 31 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition

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 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 on an altachment with an address.

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