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

**PROFIT CORPORATION ANNUAL REPORT** 

1998

Block 12 or Block 13 if



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED** 

May 07 1998 8:00am

Secretary of State

## DOCUMENT # 1. Corporation Name P93000070476 (5)

A J & C APPRAISING INC.

	•			]	
Principal Place of Business		Mailing Address			184 BETH BIBN 18819 BIN 1881
2005 PAN AM CIRCLE SUITE 500 TAMPA FL 33607 US		2005 PAN AM CIRCLE SUITE 500 TAMPA FL 33607 US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
Data dia at D	1-2-(D)	.,		10/04/1993	
<u> </u>	lace of Business	2a. Mailing Address		4, FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-3206138	Not Applicable
22		27		5. Cerlificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	0	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24	25	29 3	io	Personal Property Tax due June 30.	Yes X No
Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent					
JARVIS, ABBIE J				Lawrence Commercia	
2005 PAN AM CIRCLE			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
SUITE 500			20	05 PAN AM CIKE	<u>LE</u> -
TAMPA FL 33807			83 50	JE 570	
44.			84 City	TAMPA F	L 85 Zio Code
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corpora				rporation 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. Landauthan accept the appointment as registered agent.					
SIGNATURE GLICAN X CANOLINE 4/28/48					
SIGNATORE	alguature, typed or printed name of registered age-	cand titroit applicable (NOTE: I	Registered Agent signature requ	ived when reinstating) ATE	20 10
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change  Addition
NAME	<b>Jarvis, abbie</b> J		1.2 NAME		
STREET ADDRESS	2005 PAN AM CIRCLE #500		1.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition
NAME	CORNELIUS, JUDITH G		22 NAME		
STREET ADDRESS	2005 PAN AM CIRCLE #500		23 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL	DELETE	2 4 CHY-ST-ZIP		T. Alexander T. Addition
TITLE		☐ DELETE	31 THILE		Change Addition
NAME Street Address			3.2 NAME		
			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME			4. 2 NAME		C. Change C. Nadition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-\$1-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME		_	5.2 NAME		
STREET ADDRESS			5.3 STREFT ADDRESS		
CITY+ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
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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 exemption or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

ied, or on an attachment with an address