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

PROFIT CORPORATION ANNUAL REPORT

1998

JACKSONVILLE FL



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

NOGEF	R REAL ESTATE SERVICES OF OF Business VARD CENTER DR.	Mailing Address 3986 BOULEVARD CENTE SUITE 101 JACKSONVILLE FL 32207	R DR.			E IN THIS SPACE		
				[Date incorporated or Qualified 12/10/1993 			
2. Principal P	lace of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	+-	12/10/1883 4. FEI Number	Applied Fo	or .	
21		26			59-3213613	Not Applic		
Suite, Apt. #, etc.		Suite, Apt. #, etc.] (5. Certificate of Status Desired	\$8.75 Additional Fee Regulated	al	
City & State		City & State		- (Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	,	
Zip	Country	Zip	Country	1	8. This corporation owes or has pa	aid the current year Intangible		
24	25		30		Personal Property Tax due June			
	g. Name and Address of Curre	nt Registered Agent	81 Nam	<u></u>	0. Name and Address of New Re	gistered Agent		
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD.						····		
PLANTATION FL 33324				Address	Address (P.O. Box Number is Not Acceptable)			
			83					
			84 City			FL 85 Zip Code		
SIGNATURE	to the provisions of Sections 607.05 egistered agent, or both, in the Statim familiar with, and accept the obligation typed or pented name of registered agency.		Registered Agent signatu		nen reinstating)	DATE		
12.	OFFICERS AI	DELETE	13.		ADDITIONS/CHANGES TO OFFICE	Change Add		
NAME	EDWARDS, G DANNY	A Ditter	1.2 NAME				210011	
STREET ADDRESS	3986 BLVD CTR DR		1.3 STREET ADDRESS					
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-ST-ZIP	1				
TITLE	PCD	DELETE	2.1 TITLE	DC		Change Add	dition	
NAME	HUGHES, JR. V		2.2 NAME			• •		
STREET ADDRESS	3986 BLVD CTR DR		2.3 STREET ADDRESS	3				
CITY-ST-ZIP	JACKSONVILLE FL		2 4 CITY-ST-ZIP					
TITLE	V	DELETE	3.1 TITLE	VT		Change Add	Jilion	
NAME	STEPHENS, JAMES		3.2 NAME			·		
STREET ADDRESS	3986 BLVD CTR DR		3.3 STREET ADDRESS	3				
CITY-ST-ZIP	JACKSONVILLE FL		3.4. CITY-ST-ZIP					
TITLE	VS	DELETE	4.1 TITLE			Change Add	noilit	
NAME	JENKINS, W. LAWRENCE		4. 2 NAME	{				
STREET ADDRESS	3986 BLVD CTR DR JACKSONVILLE FL		4.3 STREET ADDRESS	3				
CITY-ST-ZIP	DV DV	DELETE	4.4 CITY-ST-ZIP	 		Change Add	dition	
THILE	TEAGLE, JAMES	☐ VECCIE	5.1 TITLE	DP		₩ orange □ wad	HUUII	
NAME OTOGET APPRECIA	3986 BLVD CTR DR		5.2 NAME	1 '			1	
STREET ADDRESS	JACKSONVILLE FL		5.3 STREET ADDRESS	`				
CITY-ST-ZIP TITLE	VIOLOGITIELE	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE	 		Change Add	dition	
NAME	HOWELL, BRYAN F.		6.2 NAME					
STREET ADDRESS	3986 BLVD CTR DR		6.3 STREET ADDRESS	.				

6.4 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling 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, on an attachment with all address.

FILED

Mar 25 1998 8:00am

Secretary of State