

3-11-98 B 3122 C  
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Mar 11 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000013589 (4)**

1. Corporation Name  
**BARNES ENTERPRISES, INC.**

Principal Place of Business  
**5037 SAN CLERC COURT  
JACKSONVILLE FL 32217**

Mailing Address  
**P.O. BOX 24254  
JACKSONVILLE FL 32241-4254**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>10754 SCOTT MILL RD.</b> Suite, Apt. #, etc.		2a. Mailing Address 26 <b>10754 SCOTT MILL RD.</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>02/17/1994</b>	
22 <b>14</b> City & State		27 <b>14</b> City & State		4. FEI Number <b>59-3252849</b> Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>	
23 <b>JACKSONVILLE, FL</b> Zip		28 <b>JACKSONVILLE, FL</b> Zip		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
24 <b>32223</b>		25 <b>USA</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
29 <b>32223</b>		30 <b>USA</b>		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent <b>BARNES, DONALD H 5037 SAN CLERC COURT JACKSONVILLE FL 32217</b>				10. Name and Address of New Registered Agent	
				81 Name <b>BARNES, DONALD H.</b>	
				82 Street Address (P.O. Box Number is Not Acceptable) <b>10754 SCOTT MILL RD</b>	
				83 <b>UNIT 14</b>	
				84 City <b>JACKSONVILLE</b> <b>FL</b> 85 Zip Code <b>32223</b>	

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>DP</b>	1.1 TITLE	<b>DP</b>
NAME	<b>BARNES, DONALD H</b>	1.2 NAME	<b>BARNES, DONALD H.</b>
STREET ADDRESS	<b>5037 SAN CLERC COURT</b>	1.3 STREET ADDRESS	<b>10754 SCOTT MILL RD. #14</b>
CITY-ST-ZIP	<b>JACKSONVILLE FL</b>	1.4 CITY-ST-ZIP	<b>JACKSONVILLE, FL 32223</b>
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 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.

SIGNATURE: **Donald H. Barnes** **DONALD H. BARNES** **3/4/98** **(904) 880-8546**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0038977

CR2E034 (10/97)