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PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P94000018904 (0)

Block 12 or Block 13 if changed, or on a authorment with an address

ALEXANDRA ROSE, INC.

Principal Place of Business

1844 BLANDING BLVD.

Mailing Address

1644 BLANDING BLVD. SUITE #3

FILED Apr 22 1998 8:00am Secretary of State



SUITE #3 DO NOT WRITE IN THIS SPACE JACKSONVILLE FL 32210 JACKSONVILLE FL 32210 3. Date Incorporated or Qualified 03/11/1994 FEI Number 2. Principal Place of Business Applied For 59-3225238 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Yes SNION Personal Property Tax due June 30. Name and Address of New Registered Agent FORTNER, CHRISTOPHER R 81 Name 1644 BLANDING BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE #3 83 JACKSONVILLE FL 32210 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 Signature, typed or prioted name of registered agent and tide if applicable (NOTE: Registered Agont signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE PRESIDENT Change Addition TITLE 1.1 TITLE FORTNER, CHRISTOPHER R NAME 1.2 NAME 10574 OTTER CREEK DRIVE STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL 32222 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE VICE PRESIDENT M Change Addition TITLE 2.1 TITLE FORTNER, ELIZABETH ANN 2.2 NAME **ROUTE 2, BOX 87** STREET ADDRESS 2.3 STREET ADDRESS LÄKE BUTLER FL 32054 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE SECRETARY TREASURER & Change 31 TITLE TITLE FORTNER, GEORGE SIDNEY 3.2 NAME NAME **ROUTE 2, BOX 87** STREET ADDRESS 3 3 STREET ADDRESS LAKE BUTLER FL 32054 CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE 4.1 TITLE Change ___ Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change Addition DELETE TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADORESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 T/ITE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 C(TY - 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