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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

P94000019662 (3) DOCUMENT #

PHILLIPS MARKETING, INC.

Principal Place of Business Mailing Address

## **FILED** May 13 1998 8:00am Secretary of State



6410 N 62 S PINELLAS PA US	T ARK FL 33781	PO BOX 1536 PINELLAS PARK FL 33: US	780	DO NOT WRITE IN	THIS SPACE
				3. Date Incorporated or Qualified 03/14/1994	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number 59-3231304	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		Certificate of Status Desired	44
City & Stat	le	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip <b>29</b>	Country 30	This corporation owes or has paid the Personal Property Tax due June 30.	Yes No
ļ	9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Regist	tered Agent
11	OWNE, CHAD W 1 E. MADISON STREET ITE 2300			Iress (P.O. Box Number is Not Acceptable)	
TA	MPA FL 33602		83		lee 7- Code
<u> </u>			1 7	nelles Pork	FL 85 Zip Code 8378/
11. Pursuant office or ragent la	to the provisions of Sections 607.0 registered agent, or both, in the Sta im familiar with, and accept the ob-	502 and 607.1508, Florida Statu ate of Florida, Such change was figations of, Section 607.0505, F		poration submits this statement for the purpation's board of directors. I hereby accept the	
SIGNATURE	Remodell T. Signatura, typed or printed name of registered	apont nod blie i applicable (NC	TE Registered Agent signature (vg)	yed when reinstating)	4/27/46 DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTORS IN 12
TITLE	D DANIDALI I	☐ DELETE	1.1 TITLE		Change Addition
NAME	PHILLIPS, RANDALL J		1.2 NAME		
STREET ADDRESS CITY-ST-ZIP	6410 62ND STREET N. PINELLAS PARK FL		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE	0	☐ DELETE	2 1 TITLE		Change Addition
NAME	PETERS, JOHN C		22 NAME		
STREET ADDRESS	2500 GULF BLVD.	A.E.	2.3 STREET ADDRESS		
CFTY - ST - ZWP	BELLEAIRE BEACH FL 346		2 4 CITY-ST-ZIP		
TITLE		☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	<del></del>	T DELETE	3.4. CITY-ST-ZIP		
NAME		☐ DELETE	4.1 TITLE		Change Addition
STREET ADDRESS			4. 2 NAME		
			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP		Chance Laster
NAME		☐ occess	5.1 TITLE		Change Addition
			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		İ
CITY-ST-ZIP		DELETE	5.4 C(TY - ST - ZIP 6.1 TITLE		[ ] (hanna   [ ] 4 2222
NAME					Change Addition
			6.2 NAME		
STREET ADORESS			6.3 STREET ADORESS		

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 attachment with an address.