

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

FILED
Jul 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **P94000063707 (1)**

1. Corporation Name

JANET ELIZABETH HOFFMAN, P.A.



Principal Place of Business

**12099 ALADDIN RD
JACKSONVILLE FL 32223**

Mailing Address

**12099 ALADDIN RD
JACKSONVILLE FL 32223**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 1252 Queen's Harbour Blvd		26 1252 Queen's Harbour Blvd		08/29/1994	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-3286031	
City & State		City & State		Applied For	
23 JACKSONVILLE		28 JACKSONVILLE		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 32225		30 Duval		<input type="checkbox"/> \$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25 Duval		31 Duval		<input type="checkbox"/> \$5.00 May Be Added to Fees	
29 32225		30 Duval		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
30 Duval		31 Duval		<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CRABTREE, R. R.
8375 DIX ELLIS TRAIL
SUITE 401
JACKSONVILLE FL 32256**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Janet E. Hoffman

(NOTE: Registered Agent signature required when reinstating)

DATE

6-19-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VP HOFFMAN, JANET E	1.2 NAME	
STREET ADDRESS	12099 ALADDIN RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ST CARILLI, JUNE G	2.2 NAME	
STREET ADDRESS	8429 ALDERMAN RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32211	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	V HOFFMAN, KELLY M	3.2 NAME	
STREET ADDRESS	12099 ALADDIN RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32223	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	V HOFFMAN, KATHRYN A	4.2 NAME	
STREET ADDRESS	12099 ALADDIN ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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

Janet E. Hoffman

6-19-98 (904) 720-3101

CR2E034 (10/97)