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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000064147 (9)

JOHN M. RICHARD INC.

incipal Place of Business	Mailing Address
PORT ST. LUCIE PORT ST LUCIE FL 34953 US	3842 S.W. CRARY ST. PORT ST LUCIE FL 34953
<del>-</del>	2a. Mailing Address
2. Principal Place of Business  Suite, Apt. #, etc.	26, Mailing Address 26 Suite, Apt. #, etc.
Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
H	26 Suite, Apt. #, etc.

**FILED** Jan 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							
PORT ST. LUCIE 3842 S.W. CRARY ST.							
PORT ST LUCIE FL 34953			PORT ST LUCIE FL 34953				
US						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 08/30/1994	
2. Principal P	lace of Businoss	2a. Mailing Ad	dress			4. FEI Number	Applied for
21		26				65-0517214	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt.	#, etc.			5. Certificate of Status Desired	38.75 Additional
22		27				5. Confidence of Status Desired	Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28				Trust Fund Contribution	
Zip	Country	Zip		Country		8. This corporation owes or has paid the	
24	25	29	30			Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre					10. Name and Address of New Regist	ered Agent
	RPORATION SERVICE COMPA	NY		81	Name		
1201 HAYS ST.			82	82 Street Address (P.O. Box Number is Not Acceptable)			
TAI	LLAHASSEE FL 32301						
				83			
				84	City		85 Zip Code
					-		FL     '
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Flor	ida Statutes, th	he above	-named corp	poration submits this statement for the purpation's board of directors. Thereby accept the	ose of changing its registered
agent la	m familiar with, and accept the oblig	gations of, Section 60	7.0505, Florida	Statutes	тне согрога :	anon's board or directors. Thereby accept (ri	e appointment as registered
SIGNATURE							
	Signature, typed or prefed name of registered ag	T-1			il signature requ		ATE
12.	OFFICERS AN	ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	RICHARD, JOHN M	L.J (		1.1 TITLE			L Change L Addition
NAME	3842 S.W. CRARY ST.			1.2 NAME			İ
STREET ADDRESS				1.3 STREE [	ADDRESS		
City - St - ZiP	PORT ST LUCIE FL 34953	···		1.4 CITY - ST	- ZIP		
TITLE	VECENBACH NIDK	ļ l		2 1 711LE			☐ Change ☐ Addition
NAME	OFFENBACH, KIRK			2.2 NAME			
STREET ADDRESS	1961 SW CYCLE STREET			2.3 STREET	ADDRESS		
CITY-ST-ZIP	PORT ST. LUCIE FL			2 4 CITY-S	T - ZIP		
TITLE	ST HAGENAN DICHARD I	[_] [		3 1 1 MLE			Change Addition
NAME	HAGEMAN, RICHARD J		<b>I</b> .	32 NAME			
STREET ADDRESS	1225 S.W. GRANVILLE AVE		1	3 3 STREET A	ADDRESS		
CITY-ST-ZIP	PORT ST. LUCIE FL 34953			3.4. CITY - S	F- 71P		
TITLE		<u>.                                    </u>		4.1 TITLE			☐ Change ☐ Addition
NAME				4. 2 NAME			
STREET ADDRESS			<b>1</b>	4.3 STREET /	ADDRESS		
CITY-ST-ZIP				4.4 CITY - ST	- 7IP		
TITLE		ĽΪ́	CLETE :	5.1 TITLE			Change Addition
NAME				5.2 NAME			
STREET ADDRESS				5 3 STREET A	NODRESS		
CITY-ST-ZIP	······································	. —— · · · · · · · · · · · · · · · · · ·		5.4 CITY-ST	- ZIP		
TITLE	•		ELETE 6	6.1 TITLE			☐ Change ☐ Addition
NAME			6	6.2 NAME			
STREET ADDRESS				6.3 STREET A	DORESS		
CITY-S1-ZIP		·		6 4 C(1Y - S1	- ZIP		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Horida 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 eath; 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 a gardeness.

1.8.98

561-336-4813