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

PROFIT CORPORATION ANNUAL REPORT

1998

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

SIGNATURE:

21



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # **P94000066508 (0)**1. Corporation Name

LOUIS L. LONG, JR., P.A.

Principal Place of Business Mailing Address

322 BEARD STREET 322 BEARD STREET
TALLAHASSEE FL 32303 TALLAHASSEE FL 32303

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2a. Mailing Address

City & State

Suite, Apt. #, etc.

## FILED Feb 05 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable

 Date Incorporated or Qualified 09/09/1994

59-3267390

5. Certificate of Status Desired

6. Election Campaign Financing

4. FEI Number

23			28		-,				iruşt Fund Ço	ntribution	<u> </u>	Added	to Fees
Zip		Country	Z	.ip	L Cor	intry		1	B. This corporation	n owes or ha	as paid the cu	rrent year Ir	ntangibie
24		25 and Address of Curren	29		30				Personal Prope	•			<b>7</b> 2No
			1(	0. Name and Ad	dress of Net	w Registered	Agent						
£C	81	Name											
322 BEARD STREET							Street Add	dress	(P.O. Box Numbe	r is Not Acce	eptable)		
TALLAHASSEE FL 32303											<u> </u>		
						83							İ
						84	City					85 Zip	Code
		<b>U</b> .1,				FL	_						
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 register 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 acction 607.0505, Florida Statutes.													
SIGNATURE		ven Colle			LOU.	1.5	6.66	$\mathcal{M}$	a.URS	,	2/2/	78	İ
Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when feinstating) DATE													
12.	- 5AY	OFFICERS AND	DIRECTO		13.				ADDITIONS/CH	ANGES TO C	FFICERS AN		
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CITY-ST-ZIP		- National Albandaria (P. 1977)	le Alexa d'Ar			TY-ST				Thirt out it	16 10		
indicated officer or	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 13 if changed, or on an attachment with an address.												