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Jun 24 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 # <u>H70788</u> <u>P9400000</u> (5) <u>PWD</u> 1. Corporation Name <u>PAUL W. DAVIS INTERNATIONAL CORPORATION</u> <u>Newco, Inc</u> <u>P9400000 76875</u>			
Principal Place of Business <u>9000 CYPRESS GREEN DRIVE</u> <u>JACKSONVILLE FL 32256</u> <u>US</u> <u>1301-7 MONUMENT ROAD</u> <u>JACKSONVILLE, FL 32225</u>		Mailing Address <u>9000 CYPRESS GREEN DRIVE</u> <u>JACKSONVILLE FL 32256</u> <u>US</u> <u>SAME AS LEFT</u>	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
9. Name and Address of Current Registered Agent <u>DAVIS, PAUL W</u> <u>301 MEADOWFIELD BLUFF ROAD</u> <u>YULEE FL 32097</u>			
10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <u>FL</u> 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 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, Section 607.0505, Florida Statutes. SIGNATURE <u>Paul W. Davis</u> (NOTE: Registered Agent signature required when reinstating) DATE <u>6-10-98</u>			
12. OFFICERS AND DIRECTORS TITLE <u>CD</u> <input type="checkbox"/> DELETE NAME <u>DAVIS, PAUL W</u> STREET ADDRESS <u>9000 CYPRESS GREEN DRIVE</u> CITY - ST - ZIP <u>JACKSONVILLE FL 32256</u> TITLE <u>PD</u> <input type="checkbox"/> DELETE NAME <u>DAVIS, BRENDA</u> STREET ADDRESS <u>9000 CYPRESS GREEN DRIVE</u> CITY - ST - ZIP <u>JACKSONVILLE FL 32256</u> TITLE <u>DS</u> <input type="checkbox"/> DELETE NAME <u>ROBINSON, TIMOTHY</u> STREET ADDRESS <u>9000 CYPRESS GREEN DRIVE</u> CITY - ST - ZIP <u>JACKSONVILLE FL 32256</u> TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY - ST - ZIP TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY - ST - ZIP TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY - ST - ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add 1.2 NAME 1.3 STREET ADDRESS <u>1301-7 MONUMENT ROAD</u> 1.4 CITY - ST - ZIP <u>JACKSONVILLE, FL 32225</u> 2.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add 2.2 NAME 2.3 STREET ADDRESS <u>1301-7 MONUMENT ROAD</u> 2.4 CITY - ST - ZIP <u>JACKSONVILLE, FL 32225</u> 3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Add 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Add 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Add 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Add 6.2 NAME 6.3 STREET ADDRESS <u>600002571386</u> 6.4 CITY - ST - ZIP <u>-06/24/98-01089-003</u> <u>***150.00</u>			

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 a 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