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

P94000080184 (2)

DOCUMENT # P9400080

FOREST RESOURCE CONSULTING, INC.

FILED Mar 18 1998 8:00am Secretary of State

101120	TIEGOGIGE GOMGGEM	101 1110				
Principal Place	of Business	B3 B4 City FL B5 Zip Code ons 607 0502 and 607 1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered pt the obligations of, Section 607 0505, Florida Statutes. Indicated the Payment and lide if Payments in the Payments in the Payments in the Payment and lide if Payments in the Payments in				
			32312		DO NOT WRITE IN THIS SPACE	
						THO OF YOU
2. Principal Pi	ace of Business	2a. Mailing Address				Applied For
21		1000				
Suite, Apt.	#, otc.					S8.75 Additional
22		27			Certificate of Status Desired	Fee Required
City & State	9	City & State			6. Election Campaign Financing	\$5.00 May Be
23				********	Trust Fund Contribution	Added to Fees
Z ip	Country	Zip	Cou	ntry	•	
24	25		30			
		nt Hegistered Agent		O1 Noma	10. Name and Address of New Reg	Ingraled Agent
	ARLSON, JOHN D			Name		
	09-D MAHAN DRIVE		İ	82 Street Add	lress (P.O. Box Number is Not Acceptab	ө)
TA	LLAHASSEE FL 32308					
				93		
			l	84 City		85 Zip Code
,						
11. Pursuant	to the provisions of Sections 607.050 egistered agent, or both, in the State	02 and 607.1508, Florida: e of Horida, Such change	Statutes, the at was authorized	iove-named cor I by the corpora	poration submits this statement for the pi ition's board of directors. I hereby accep	urpose of changing its register t the appointment as registere
agent. I a	m familiar with, and accept the oblic	gations of, Section 607.05	05, Florida Stat	utes.		.,
SIGNATURE						
				Agent signature requ		
12. TITLE	D OFFICERS AN	AND THE RESERVE OF THE PARTY OF		IF	ADDITIONS/BITAINGES TO OFFICE	
NAME	KELLY, DAVID N	, O.C.				
	1717 CHESTNUT HILL					
STREET ADDRESS	TALLAHASSEE FL 32312					
CITY-ST-ZIP TITLE	D	DELE				Change Addi
NAME	GATLIN, DEBORAH		■ ⁻			
STREET ADDRESS	1717 CHESTNUT HILL					
	TALLAHASSEE FL 32312					
CITY+ST-ZIP TITLE		□ DELE				Change Addi
NAME		,				
STREET ADDRESS			I '	1		
CITY-ST-ZIP				i		
TITLE		DELE				☐ Change ☐ Addi
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NAME			5.2 N/	ME		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				TY-ST-ZIP		
TITLE	<u> </u>	DELE				Change Add
NAME			6.2 N/	ME		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				IY-ST-ZIP		
44 1 hazabar	Large attraction to be a second at a secon	with this filling door not on			Section 119 07(3)(i) Florida Statutes I	further certify that the informat

4. 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 eath; that I am an officer or director of the corporation by 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 change of form an attacking int with an addition.

SIGNATURE:

Kellen

2/8/98 850-414-086