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Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

2000

DOCUMENT # P94000086048

1. Corporation Name

The Speaks/Ellis Group, Inc.

00030625

Principal Place of Business

Mailing Address

1335 Fleming Ave, #237
Ormond Beach, FL 32174
U.S.

1335 Fleming Ave, #237
Ormond Beach, FL 32174
U.S.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/21/94

4. FEI Number

59-1856209

Applied For

Not Applicable

5. Certificate of Status Desired

XX

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30

Yes

No

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

8. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Speaks, Mr. Jerry F.
1335 Fleming Avenue, #237
Ormond Beach, Florida 32174

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

Signature of registered agent or person named in registered agent and title of applicant

(NOTE: Registered agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
P
Speaks, Mr. Jerry F.
1335 Fleming Avenue, #237
Ormond Beach, FL 32174

11. TITLE
12. NAME
13. STREET ADDRESS
14. CITY-STATE-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
Ellis, Ms. Debra
11704 Camden Road
Williamsport, MD 21795

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY-STATE-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
Robinson, Mr. John
127 Whitecaps Circle
Maitland, FL 32751

31. TITLE
32. NAME
33. STREET ADDRESS
34. CITY-STATE-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
DELETE

41. TITLE
42. NAME
43. STREET ADDRESS
44. CITY-STATE-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
DELETE

51. TITLE
52. NAME
53. STREET ADDRESS
54. CITY-STATE-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
DELETE

61. TITLE
62. NAME
63. STREET ADDRESS
64. CITY-STATE-ZIP
Change Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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:

Mr. Jerry F. Speaks

President

2/24/00

(904) 615-4997

CR2E034 (10/97)