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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000002033 (5) SHARED MANAGEMENT SYSTEMS, INC.

FILED Jan 22 1998 8:00am Secretary of State



D. J. A.D. and D. Alexandro						- 1	EMAE MARAM IRI	- I TORSTONN THE COLON DISSES AND I DURES AND I DURES BRISH RENGE BRISH RENGE BRISH STORE STATE OF THE			
Principal Place of Business Mailing Address											
2111 CAPTAIN KIDD DR 2111 CAPTAIN KIDD DR				An. 4							
FERNANDINA BEACH FL 32034		FERNANDINA BEACH FL 32034				DO NOT MOTE IN THIS SPACE					
						DO NOT WRITE IN THIS SPACE					
						 Date Incorporated or Qualified 01/06/1995 					
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Ар	plied For			
21		26				59-3306321	No	t Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5 Certificate of Status Desired	\$8.75	Additional			
22		27				5. Certificate of Status Desired	Fee Re	quired			
City & Stat	le	City & State				6. Election Campaign Financing	\$5.00	May Be			
23		28				Trust Fund Contribution	Added t				
Zip	p Country Zip Co			ntry		8. This corporation owes or has paid the current	nt year Int	angible			
24	25 29 30			Personal Property Tax due June 30. 🔲 Yes 🔲 No							
g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent							
LELOUP, SUZANNE M					Name						
		00 00-14-1		6	(2.2.2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1						
	11 Captain Kidd dr Rnandina Beach Fl 32034		82 St		Street Addres	ss (P.O. Box Number is Not Acceptable)					
'-	MICHIDINA DEACHT E DEGOT			83							
			Ī	84	City	FL	85 Zip (Code			
11 Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the					-named corpo	pration submits this statement for the purpose of c	hanging it	s registered			
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.											
agent. I am tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE Signature, typed or printed name of registered agent and little it applicable. (NOTE: Registered Agent signature required when reinstalling) DATE											
12.		ND DIRECTORS	13.	ngu i	K Signature required	ADDITIONS/CHANGES TO OFFICERS AND D	URECTOR	S IN 12			
TITLE	P	DELETE 1.1					Change	Addition			
NAME	WEST COUNTY IN		1.2 NA		1		-				
STREET ADDRESS	0444 CARTAIN KIRD DD				ADDRESS						
	FEDNIANDINA DEACH EL 20024				1						
CITY-ST-ZIP	1.7			Y-ST	-217		Change	Addition			
TITLE	LEI OUR OUTLANDE		4	2.1 TITLE		<u></u>	onango				
NAME	2111 CAPTAIN KIDD DR.			2.2 NAME							
STREET ADDRESS			2.3 STREET ADDRESS		1						
CtTY - ST - ZIP			2. 4 CI		T-ZIP	* ***	01	Addition			
TITLE				3.1 TITLE		3-AE	_ Change	Mooston			
NAME			3.2 NA	ME							
STREET ADDRESS			3.3 ST	REET A	ADDRESS						
CITY - ST - ZIP			3,4. CI	TY-ST	r-zip						
TITLE	DELETE 4.1		4.1 TiT	LE		Ľ	Change	Addition			
NAME			4. 2 N/	AME	Ì						
STREET ADDRESS			4.3 ST	REET A	ADDRESS						
CITY-ST-ZIP			4,4 CIT	Y-ST	-ZIP						
TITLE		DELETE					Change	Addition			
NAME			5,2 NA	ME							
STREET ADDRESS					ADDRESS						
			5.4 CIT								
CITY-ST-ZIP TITLE			6.1 TiT		- 411		Change	Addition			
NAME			6.2 NA								
				6.3 STREET ADDRESS							
CITY - ST - ZIP			6.4 CIT	Y-ST	-ZIP		* 4				

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 12 or Block 13 if changed, or on an attachment with an address.

231-3596

CR2E034 (10/97)