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FILED
Apr 17 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 # P95000003636 (4)

1. Corporation Name

BARNETT CAPITAL ADVISORS, INC.

Principal Place of Business

9000 SOUTHSIDE BLVD
BLDG 100
JACKSONVILLE FL 32256

Mailing Address

50 NORTH LAURA STREET
ATTN: REGULATORY RELATIONS
JACKSONVILLE FL 32202



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

01/12/1995

4. FEI Number

59-3296276

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ENGLAND, GARY W
50 NORTH LAURA STREET
MAIL CODE 099-000-0907
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME LOSKILL, JAMES E
STREET ADDRESS 796 5TH AVENUE SOUTH
CITY-ST-ZIP NAPLES FL 34102 ☒ DELETE

TITLE D
NAME WIRTH, JEFFREY J
STREET ADDRESS 9000 SOUTHSIDE BLVD.
CITY-ST-ZIP JACKSONVILLE FL 32256 ☒ DELETE

TITLE CD
NAME TERRY, DONNA L
STREET ADDRESS 9000 SOUTHSIDE BLVD.
CITY-ST-ZIP JACKSONVILLE FL 32256 ☒ DELETE

TITLE D
NAME NELSON, ROBERT L
STREET ADDRESS 9000 SOUTHSIDE BLVD.
CITY-ST-ZIP JACKSONVILLE FL 32256 ☒ DELETE

TITLE D
NAME ANDERSON, RICHARD A
STREET ADDRESS 9000 SOUTHSIDE BLVD.
CITY-ST-ZIP JACKSONVILLE FL 32256 ☒ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME Ablin, Jack A.
1.3 STREET ADDRESS 9000 Southside Blvd. Bldg 100
1.4 CITY-ST-ZIP Jacksonville, FL 32256 ☐ Change ☒ Addition

2.1 TITLE D
2.2 NAME Gershen, Richard S
2.3 STREET ADDRESS 101 S. Tryon Street
2.4 CITY-ST-ZIP Charlotte, N.C. 28255-0001 ☐ Change ☒ Addition

3.1 TITLE D
3.2 NAME Galt, III, Martin E
3.3 STREET ADDRESS 800 Market Street
3.4 CITY-ST-ZIP Saint Louis, MO 63101-2607 ☐ Change ☒ Addition

4.1 TITLE D
4.2 NAME Deem, Holly D
4.3 STREET ADDRESS 101 S. Tryon Street
4.4 CITY-ST-ZIP Charlotte, N.C. 28255-0001 ☐ Change ☒ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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)(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.

SIGNATURE:

[Signature]

Jack A. Ablin

3/9/98 (904) 987-6091

CR2E034 (10/97)