

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

FILED

Jun 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000020281
1. Corporation Name
CLASS A Properties of SAX, Inc.

Principal Place of Business
10751 Karen Gate Lane
Jacksonville, FL 32225
Mailing Address
P.O. Box 8510
Jacksonville, FL 32239

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/13/95
4. FEI Number
59-3294030
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

2. Principal Place of Business
21 10751 Karen Gate Lane
Suite, Apt. #, etc.
22
City & State
23 Jacksonville, FL
Zip
24 32225
Country
25
2a. Mailing Address
26 P.O. Box 8510
Suite, Apt. #, etc.
27
City & State
28 SAX, FL
Zip
29 32239
Country
30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Morgan L. Skinner
10041 Patterson Cir. N.
Jacksonville, FL 32225

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 Morgan L. Skinner

4/28/98

12. OFFICERS AND DIRECTORS
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE President
1.2 NAME Morgan L. Skinner
1.3 STREET ADDRESS 10751 Karen Gate Lane
1.4 CITY-ST-ZIP Jacksonville, FL 32225
2.1 TITLE Vice President
2.2 NAME Eric T. Skinner
2.3 STREET ADDRESS 4430 St. Johns Ave
2.4 CITY-ST-ZIP Jacksonville, FL 32210
3.1 TITLE Treasurer
3.2 NAME Lee A. Skinner
3.3 STREET ADDRESS 10751 Karen Gate Lane
3.4 CITY-ST-ZIP Jacksonville, FL 32225
4.1 TITLE Secretary
4.2 NAME Johanna T. Skinner
4.3 STREET ADDRESS 10751 Karen Gate Lane
4.4 CITY-ST-ZIP Jacksonville, Florida 32225
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
800002543288
-06/02/98--01014--008
***150.00

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 Johanna T. Skinner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
4/12/98 904-641-0600

CR2E034 (10/97)