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

Mailing Address

2202 NORTH MAIN ST.

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Paice of Business

2202 NORTH MAIN ST.

STREET ADDRESS

SIGNATURE:

COTY - ST. 785



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 28 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000023827 (5)

M.C. BONNER & ASSOCIATES, INC.

JACKSONVILLE FL 32206 JACKSONVILLE FL 32206-3760 3a. Date of Last Report Date Incorporated or Qualified 03/27/1996 03/24/1995 2, Principa Place of Business 2a. Mailing Address Applied For FEI Number 59-3307023 Not Applicable 21 26 Saite Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State Cry & Starc \$5.00 May Be 6. Election Campaign Financing П 23 Trust Fund Contribution Added to Fees Country Zφ Country 8. This corporation has liability for intangible tax under s. 199.032, Yes 🗌 No 30 Florida Statutes 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MCMORROW, THOMAS F 1301 RIVERPLACE BLVD. Street Address (P.O. Box Number is Not Acceptable) **SUITE 1836** 83 JACKSONVILLE FL 32207 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. Thereby accept the appointment as registered agent it am familiar with and accept the obligations of, Section 607,0505, Florida Statutes. Stylin in its perfor part of traine of nigoteed agent and tilk of applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Change Addition EILE 1.1 TITLE 1.2 NAME NAME MIKELL, MERLE A 3416 LENCZYK DRIVE WEST 1.3 STREET ADDRESS \$18617 # TURES! JACKSONVILLE FL 32277 1.4 CITY - ST- ZIP Addition DELETE 2.1 TITLE Change 101.E NAM: Bonner, Shane D 2.2 NAME 3253 JUSTINA RD., #8 2.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32277 2. 4 CITY-ST-ZIP Cdy-St DELETE ___ Change ■ Addition TIEC 31 THLE N.M. 3.2 NAME 3.3 STREET ADDRESS STREET ADJUSTES 3.4. CITY - ST - ZIP C.D. St 2 P Addition DELETE TT Change 4.1 TITLE THE NGJi 4.2 NAME STEEL CASCIONESS 4.3 STREET ADDRESS Offy-St 4.4 CITY - ST - ZIP DELETE Addition Change THE 5.1 TITLE Marile 5.3 STREET ADDRESS STREET ADDINESS 54 CITY-ST-ZIP CRY- 91 - 28 DELETE Change ___ Addition 1:01 61 TITLE NAME 6.2 NAME

IGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

14. I do nereby 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 Brock 12 or Black 13 of chapter 607 or an attachment with an address.