

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

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 # P95000029297 (5)

1. Corporation Name
JACKSONVILLE WARRIORS, INC.



Principal Place of Business: **12947 JULINGTON RIDGE DR JACKSONVILLE FL 32258**
 Mailing Address: **12947 JULINGTON RIDGE DR JACKSONVILLE FL 32258**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	3 Wilmart Place	26	3 Wilmart Place	05/01/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
				59-3310035	
22. City & State		27. City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 Palm Coast, FL		28 Palm Coast, FL		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Zip		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
24 32164	Country	29 32164	Country		
	25 Flagler		30 Flagler		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
HEAD, EDDIE C				81 Name Paul E. Bollenbach, III			
12947 JULINGTON RIDGE DR				82 Street Address (P.O. Box Number is Not Acceptable) 3 Wilmart Place			
JACKSONVILLE FL 32258				83			
				84 City Palm Coast FL 85 Zip Code 32164			

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 607.0503, Florida Statutes.

SIGNATURE: *Paul E. Bollenbach* DATE: **4/12/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RANDALL, GREGORY L.	1.2 NAME	
STREET ADDRESS	1978 HAWCREST DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	1.4 CITY-ST-ZIP	
TITLE	T	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOLLENBACH, PAUL I	2.2 NAME	
STREET ADDRESS	4479 FLINT DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	NORTHPOINT FL	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VEAHMAN, LARRY A	3.2 NAME	
STREET ADDRESS	8664 NUSSBAUM RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32210	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: *Paul E. Bollenbach* DATE: **3/31/98** 9044393600

CR2E034 (10/97)