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Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90046 012 ***150.00

04/23/99

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000031094

1. Corporation Name FM II, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 9551 BAYMEADOWS RD SUITE 4 JACKSONVILLE FL 32256

Mailing Address 9551 BAYMEADOWS RD SUITE 4 JACKSONVILLE FL 32256

3. Date Incorporated or Qualified 04/11/1995

2. Principal Place of Business 2a. Mailing Address

4. FEI Number 59-3314712 Applied For Not Applicable

21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.

5. Certificate of Status Desired \$8.75 Additional Fee Required

22. City & State 27. City & State

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

23. Zip Country 28. Zip Country

8. This corporation owes the current year intangible Personal Property Tax. Yes No

24. Zip Country 25. Zip Country 29. Zip Country 30. Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STOKES, E. CHESTER JR 9551 BAYMEADOWS RD SUITE 4 JACKSONVILLE FL 32256

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

Table with 2 main columns: 12. OFFICERS AND DIRECTORS, 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows include officer details like name, address, and title.

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...

SIGNATURE: Sherry Hice Sherry Hice 4/23/99 904/739-2249

CR2E034 (1/98)