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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 01 1998 8:00am

Secretary of State

Change Addition

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000044037 (6)

| Principal Place<br>159 U.S. 17 S<br>YULEE FL 320 | e of Business  | Mailing Address P.O. BOX 747 FERNANDINA BEACH |  | DO NOT WRITE IN THIS SPACE  |                      |
|--|--|---|--|---|----------------------|
| - 5- 15  | ace of Business  |   |  | 3. Date Incorporated or Qualified 06/08/1995 4. FEI Number Applied                |                      |
|  | ace or Business  | 2a, Mailing Address                           |  | 07 070000   |                      |
| Suite, Apt                                       | # Atc  | Suite, Apt. #, etc.                           |  | \$9.75 Augus  |                      |
| 22   |  | 27  |  | 5. Certificate of Status Desired Fee Required                                     |                      |
| City & State                                     | 9  | City & State                                  |  | 6. Election Campaign Financing \$5.00 May to Trust Fund Contribution Added to Fee |                      |
| Zip  | Country  | Zip   | Country  | 8. This corporation owes or has paid the current year Intangible                  | le                   |
| 24   | 25   | 29  | 30   | Personal Property Tax due June 30. 🔀 Yes 🔲 No                                     |                      |
|  | 9. Name and Address of Cur<br>OCKER, JEANNIE   | rrent Registered Agent                        | 81 Name  | 10. Name and Address of New Registered Agent                                      |                      |
| 11, Pursuant office or reagent. I a              | to the provisions of Sections 607.1 egistered agent, or both, in the St m familiar with, and accept the of Edward. |   | atutes, the above-named ras authorized by the corp for Florida Statutes. | Toporation's board of directors. I hereby accept the appointment as regist        | 7<br>stered<br>tered |
|  |  |   |  | e required when reinstating) DATE   |                      |
| 12.  | OFFICE R\$   | AND DIRECTORS  DELETE                         | 13.  | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1                                  | 12<br>Addition       |
| TITLE  | BLOCKER, JEANNIE   | DA DELETE                                     |  | Edward J. Greene Dichange   | Addition             |
| NAME   | 13 JASMINE PLACE   |   | 1.2 NAME   |   | ,                    |
| STREET ADDRESS                                   | FERNANDINA BEACH FL 3  | 32034   | 1.3 STREET ADDRESS   | 159 US 17 500H7   |                      |
| CITY-ST-ZIP<br>TITLE                             | 12   | DELETE  | 1.4 CITY - ST- ZIP<br>2.1 TITLE  | Change D  | Addition             |
| NAME   |  | beare   | 2.2 NAME   |   | Accilion             |
| STREET ADDRESS                                   |  |   | 2.3 STREET ADDRESS   |   |                      |
| CITY-ST-ZIP                                      |  |   | 2.4 CITY-ST-ZIP  |   |                      |
| TITLE  |  | DELETE  | 3.1 TIFLE  | Change D /  | Addition             |
| NAME   |  |   | 3.2 NAME   |   |                      |
| STREET ADDRESS                                   |  |   | 3.3 STREET ADDRESS   |   |                      |
| CITY - ST - ZIP                                  |  |   | 3.4. CITY - ST - ZIP   |   |                      |
| TITLE  |  | DELETE  | 4.1 TITLE  | ☐ Change ☐ A  | Addition             |
| NAME   |  |   | 4. 2 NAME  |   |                      |
| STREET ADDRESS                                   |  |   | 4.3 STREET ADDRESS   |   |                      |
| CITY-ST-ZIP                                      |  |   | 4.4 CiTY-ST-ZIP  |   |                      |
| TITLE  |  | ☐ DELETE                                      | 5.1 TITLE  | ☐ Change ☐ /  | Addition             |
| NAME   |  |   | 5.2 NAME   |   |                      |

64 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

DELETE

CIONATURE GAMENT ON MARKE FAIRM T. GLOODE SIT/00 904/226-8560