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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000046541 (5)

PNC, INC.

Principal Place of Business

FILED Apr 20 1998 8:00am Secretary of State

2475 - 10 MCMULLEN BOOTH ROAD GLEARWATER FL 34619		13910 N DALE MABRY STE 1 TAMPA FL 33618 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/15/1995
2. Principal Pl	ace of Business	2a. Mailing Address			4, FEI Number Applied For
21		26			59-3319483 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27			Fee Required
City & State		City & State			Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
—ı Zip	Country	Zip	Countr	ý	8. This corporation owes or has paid the current year Intangible
24	25		30		Personal Property Tax due June 30. X Yes No
	g, Name and Address of Curren	r Hegistered Agent	81	Nam	10. Name and Address of New Registered Agent
SANDERS, WALTER			"	INan	lane
	10 N DALE MABRY		82	82 Street Address (P.O. Box Number is Not Acceptable)	
STE				-	
TAN	#PA FL 33618		83	1	
			84	City	ity FL 85 Zip Code
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 amiliar with, and accept the obligations of. Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed native of registered agent and late of agent					
TITLE	D OFFICERS AND	DELETE	13. 1.1 TOLE	···	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
		□ DECCIE			C crange C Adminos
NAME	TROUTMAN, PATRICK A		1.2 NAME		
STREET ADDRESS	11725 DERBYSHIRE DRIVE		1.3 STAEE		
CITY-ST-ZIP	TAMPA FL	DELETE	1.4 CITY-	ST-ZIP	P Change Addition
TITLE	D NICHAROMOVI OUDIOTODUI	_	2.1 TITLE		Change Addition
NAME	NIEWIAROWSKI, CHRISTOPHE	:K E	2.2 NAME		
STREET ADDRESS	2366 WETHERINGTON ROAD		2.3 STALE		
CITY-ST-ZIP	CLEARWATER FL 34625	Delete	2. 4 City-	ST-ZIP	IP ☐ Change ☐ Addition
TITLE			31 TITLE		Li Change Li Abdition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREE		
CITY-ST-ZIP		DELETE	3 4. CITY-	ST-ZIP	IP Change Addition
TITLE			4.1 TITLE		Change C Addition
NAME			4. 2 NAME		none a
STREET ADDRESS			4.3 STREE		
CITY-ST-ZIP TITLE		DELETE	4.4 C/TY - 5.1 TITLE	si - ZIP	P Change Addition
·					Change Mounton
NAME CORECT ADDRESS			5.2 NAME	r a Doncos	NDC-CC
STREET ADDRESS			5.3 STREE		
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY - 6.1 TITLE	51-ZIP	P Change Addition
i			6.2 NAME		Citalize Addition
NAME OTOTET ADDRESS				r anence:	ince
STREET ADDRESS			6.3 STREE		
CITY-ST-ZIP	artify that the information supplied	th this filing does not qualify to	6.4 CITY -		P 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 composition or the recover or trustoc empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 is changed, or on an area inment with an address.					