

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

FILED
Apr 30 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 # P95000048994 (4)

1. Corporation Name
ONE GRAND, INC.



Principal Place of Business
~~901 N MAIN ST~~
JACKSONVILLE FL 32202
US

Mailing Address
~~901 N MAIN ST~~
JACKSONVILLE FL 32202
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 10518 FORT GEORGE RD

Suite, Apt. #, etc.

22 City & State

23 Zip 32226 Country

2a. Mailing Address

26 10518 FORT GEORGE RD

Suite, Apt. #, etc.

27 City & State

28 Zip 32226 Country

3. Date Incorporated or Qualified

06/19/1995

4. FEI Number

59-3363846

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GAUDRY, CHARLES L JR

~~901 N MAIN ST~~
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

10518 FORT GEORGE ROAD

83

84 City

FL

85 Zip Code

32226

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 date of appointment

(NOTE: Registered Agent signature required when reinstating)

DATE

C. L. Gaudry Jr.
C. L. GAUDRY JR.

3/6/98

12. OFFICERS AND DIRECTORS

TITLE VD ☐ DELETE
NAME KNIGHT, ROBERT
STREET ADDRESS ~~901 N MAIN ST~~
CITY-ST-ZIP JACKSONVILLE FL

TITLE VD ☐ DELETE
NAME VAN WINKEL, ROBERT
STREET ADDRESS ~~901 N MAIN ST~~
CITY-ST-ZIP JACKSONVILLE FL

TITLE PSTD ☐ DELETE
NAME GAUDRY, CHARLES L JR
STREET ADDRESS ~~901 N MAIN ST~~
CITY-ST-ZIP JACKSONVILLE FL

TITLE VD ☐ DELETE
NAME MUYRES, DAVID
STREET ADDRESS ~~901 N MAIN ST~~
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 10518 FORT GEORGE ROAD
1.4 CITY-ST-ZIP JACKSONVILLE, FL 32226

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS SAME AS ABOVE
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 *C. L. Gaudry Jr.* C. L. GAUDRY JR. 3/6/98 904 251 3540

CR2E034 (10/97)