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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000049327 (6)

POLI-SCI CONSULTING, INC.

FILED Feb 27 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address		1 (99)(92) 1(0 (0)0) 2(0) 65(0) 25(0) 25(0) 25(0)	1810 18100 EISTE EFDI (601 100)
3106 S. HORSESHORE DRIVE 3106 S. HORSESHOE DRIV	IVE		
SUITE G SUITE G NAPLES FL 33042 NAPLES FL 33042		DO NOT WRITE IN THI	S SPACE
US US		3. Date Incorporated or Qualified	
		06/21/1995	
2. Principal Place of Business 2a. Mailing Address		4. FEI Number	Applied For
21 26		65-0597457	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional
22 27		C. Commodite of Oldius Desired	Fee Required
City & State City & State		6. Election Campaign Financing	\$5.00 May Be
Zip Country Zip	Country	Trust Fund Contribution	Added to Fees
	Country	8. This corporation owes or has paid the c	
9. Name and Address of Current Registered Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registere	ZaYes ∐ No
COLEMAN, J. MICHAEL	81 Name	10, 112110 the reduced of the registro	o vigorit
3174 E TAMIAMI TRAIL	20 0: : : : :		
NAPLES FL 33962-5793	82 Street Add	ress (P.O. Box Number is Not Acceptable)	
.** 250 15 00005 0100	83		
	84 City		85 Zip Code
		F	L
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute office or registered agent, or both, in the State of Florida. Such change was an agent. I am familiar with, and accept the obligations of, Section 607.0505, Flor SIGNATURE. Signature, typed or provided range of registered agent and take if applicable. (NOTE)	uthorized by the corporal rida Statutes. Fingistered Agent signature requires		opointment as registered
12. OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE PS DELETE	1.1 TITLE		Change Addition
NAME LAYMON, RICHARD	1.2 NAME		
STREET ADDRESS 120 CYPRESS POINT DRIVE	1.3 STREET ADORESS		
CITY-ST-ZIP NAPLES FL	1.4 CITY-ST-ZIP		
TITLE VPT LIBERTE	2.1 TITLE		L Change Addition
NAME LAYMON, SANDRA	2.2 NAME		
STREET ADDRESS 120 CYPRESS POINT DRIVE CITY-ST-ZIP NAPLES FL	2.3 STREET ADDRESS	.	
CITY-ST-ZIP NAPLES FL TITLE DELETE	2.4 CITY-ST-ZIP 31 TITLE		Change Addition
NAME	32 NAME		
STREET ADDRESS	33 STREET ADDRESS		
CITY-SI-ZIP	3.4. CITY-ST-ZIP		[
THILE DELETE	4.1 TITLE		Change Addition
NAME	4. 2 NAME		'''
STREET ADDRESS	4.3 STREET ADDRESS		
CITY-ST-ZIP	4.4 CITY-ST-ZIP		
TITLE DELETE	5.1 T/TLE		Change Addition
NAME	5.2 NAME		
STREET ADDRESS	5.3 STREET ADDRESS		
CITY-ST-ZIP	5.4 CITY-ST-ZIP		
TITLE DELETE	6.1 TITLE		Change Addition
NAME I	.		
NAME	6.2 NAME		
NAME STREET ADDRESS CITY-SI-ZIP	6.2 NAME 6.3 STREET ADDRESS		

indicated on this annual report or supplier with an address. Turner certify that the information stated in Section 119.07(3)(i), Florida Statutes, Turner certify that the information indicated on this annual report or supplier 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 of the register of fusion of the corporation of the register of fusion of the corporation of the

SIGNATURE: