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 # P95000066410 (8)

STAR LEGAL RESEARCH, INC.

Principal Place of Business

Mailing Address

350 EAST FORSYTH ST. JACKSONVILLE FL 32202 350 EAST FORSYTH ST.

FILED Apr 02 1998 8:00am Secretary of State



JACKSONVILLE FL 32202		JACKSONVILLE FL 32202			DO NOT WRIT	DO NOT WRITE IN THIS SPACE				
						 Date Incorporated or Qualified 08/28/1995 				
2. Principal Pl	ace of Business	2a. Mailing Address		•		4. FEI Number			Applied For	
21		26			59-3332626			Not Applicable		
Suite, Apt :	♥, efc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required		
City & State		City & State		•	•	6. Election Campaign Financing		\$5.0	O May Be	
23		28				Trust Fund Contribution			d to Fees	
Zip	Country	Zıp	Co	untry	,	8. This corporation owes or has p	aid the curr	ent year	Intangible	
24	25	29	30			Personal Property Tax due Jun		Yes	□ No	
	g. Name and Address of Curren	t Registered Agent			,	10. Name and Address of New R	legistered A	gent		
Persons, Robert B Jr. 2215 So uth Third St., Suite 101					81 Name					
					82 Street Address (P.O. Box Number is Not Acceptable)					
JAC	KSONVILLE FL 32250									
				83						
				84	City		· · · · · · · · · · · · · · · · · · ·	Ter 7	p Code	
				04	City		FL	85 Zi	p Code	
agent Lar SIGNATURE	n familiar with, and accept the obliga	ations of, Section 607.0505	5, Florida Sta	atute	S.	poration's board of directors. I hereby according to the second of the control of	DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFF		DIRECTO	ORS IN 12	
TITLE	V	X DELETE		IITLE		DOMINAT	102/10/11/2	☐ Change		
NAME	ETHERIDGE, ANNE E	,-		NAME		ANNE E. ETHERIDE	ē			
STREET ADDRESS	350 EAST FORSYTH ST		135	STREET	ADDRESS	350 B. FORSYTH ST.				
CITY-ST-ZIP	JACKSONVILLE FL			DITY-S		PRESIDENT ANNE E. ETHERIDG 350 E. FORSYTH ST. JACKSONVILLE, FL	377) >		
TITLE		☐ DELETE		TITLE	<u>.</u>		7	Change	e Addition	
NAME			221	NAME						
STREET ADDRESS			235	STHEET	ADDRESS					
CHTY-ST-ZIP			2 4	CITY-	ST-ZIP					
TATLE		DELET e	3.1 1	TITLE				Change	e 🔲 Addition	
NAME			3.21	NAME						
STREET ADDRESS			335	STREET	ADDRESS					
CITY-ST-ZIP			3.4.	CITY-:	ST - ZIP					
TITLE		☐ DELETE	4.1 1	TITLE				Change	e 🔲 Additio	
NAME			4.2	NAME						
STREET ADDRESS			4.3 5	STREET	ADDRESS					
CITY-ST-ZIP			4.4 (CHTY-S	IT - ZIP					
TITLE		☐ DELETE	5.1 3	TITLE				Change	e 🔲 Addition	
NAME			5.21	MAME						
STREET ADDRESS			5.3 9	STREET	ADDRESS					
CITY-ST-ZIP				CITY - S						
TITLE		☐ DELETE		IILE				Change	Addition	
NAME			6.21	MAME						
STREET ADDRESS			6.3 5	STREET	ADDRESS					
CITY-ST-ZIP	,			CITY - S						
14. Thereby c	ertify that the information supplied wi	th this filing does not quali	ify for the ex	emp	tion state	ed in Section 119.07(3)(i), Florida Statutes.	I further cer	tify that th	ne information	
14. I hereby condicated officer or conficer or confice	on this annual report or supplementa	I annual report is true and liver or trustee empowered	ify for the ex accurate ar	emp	tion state at my sig	I ed in Section 119.07(3)(i), Florida Statutes, mature shall have the same legal effect as s required by Chapter 607, Florida Statutes	if made und	ler oath	ı; t	