

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

FILED

Feb 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000070637 (0)

1. Corporation Name

6401 SOUTH BOSTON STREET INC.

Principal Place of Business

1801 HERMITAGE BLVD
SUITE 100
TALLAHASSEE FL 32308
US

Mailing Address

1801 HERMITAGE BLVD
SUITE 100
TALLAHASSEE FL 32308
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/13/1995

4. FEI Number

36-4046179

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$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

2. Principal Place of Business

21 1801 Hermitage Blvd.

Suite, Apt. #, etc.

22 600

City & State

23 Tallahassee, FL

Zip

24 32308

Country

25 US

2a. Mailing Address

26 1801 Hermitage Blvd.

Suite, Apt. #, etc.

27 600

City & State

28 Tallahassee, FL

Zip

29 32308

Country

30 US

9. Name and Address of Current Registered Agent

TODD, DAVID E
1801 HERMITAGE BLVD
SUITE 100
TALLAHASSEE FL 32308

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
NAME BENNETT, DOUGLAS W
STREET ADDRESS 1801 HERMITAGE BLVD
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE ☒ DELETE

D
NAME MILLER, TODD A
STREET ADDRESS 1801 HERMITAGE BLVD
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE ☐ DELETE

VAS
NAME BURDI, THOMAS
STREET ADDRESS 180 N. LASALLE STRET
CITY-ST-ZIP CHICAGO IL 60601

TITLE ☐ DELETE

VS
NAME NOELL, JOHN W
STREET ADDRESS 180 N. LASALLE STREET
CITY-ST-ZIP CHICAGO IL 60601

TITLE ☐ DELETE

VTS
NAME SMITH, ROGER E
STREET ADDRESS 180 N. LASALLE STREET
CITY-ST-ZIP CHICAGO IL 60601

TITLE ☐ DELETE

P
NAME EDELMAN, HOWARD J
STREET ADDRESS 180 N. LASALLE STREET
CITY-ST-ZIP CHICAGO IL 60601

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☒ Addition

D
NAME Jeffrey L. Smith
STREET ADDRESS 1801 Hermitage Blvd.
CITY-ST-ZIP Tallahassee, FL 32308

21 TITLE ☐ Change ☒ Addition

VASD
NAME James W. Horton
STREET ADDRESS 1801 Hermitage Blvd.
CITY-ST-ZIP Tallahassee, FL 32308

31 TITLE ☒ Change ☐ Addition

VTAS
NAME Roger E. Smith
STREET ADDRESS 180 N. LaSalle Street
CITY-ST-ZIP Chicago, IL 60601

41 TITLE ☐ Change ☒ Addition

VAS
NAME Luanne K. Good
STREET ADDRESS 1801 Hermitage Blvd.
CITY-ST-ZIP Tallahassee, FL 32308

51 TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME
63 STREET ADDRESS
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

SIGNATURE: Douglas W. Bennett, Director

2-20-98 850-488-4406

CR2E034 (10/97)