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May 12 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000071618 (9)

1. Corporation Name  
EIGHT STREET, INC.



Principal Place of Business  
1645 SAN MARCO BOULEVARD  
JACKSONVILLE FL 32207

Mailing Address  
1645 SAN MARCO BOULEVARD  
JACKSONVILLE FL 32207-3001

3. Date Incorporated or Qualified  
09/14/1995

3a. Date of Last Report  
05/01/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number 59-3347805	Applied For Not Applicable
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
22. City & State	27. City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
23. Zip	28. Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
24. Country	29. Country		

9. Name and Address of Current Registered Agent

CLARK, ROSS T  
1558 SAN MARCO BOULEVARD  
JACKSONVILLE FL 32207

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	PRESIDENT
NAME	LUCAS, W D	1.2 NAME	
STREET ADDRESS	1645 SAN MARCO BOULEVARD	1.3 STREET ADDRESS	
CITY- ST- ZIP	JACKSONVILLE FL 32207	1.4 CITY- ST- ZIP	
	<input type="checkbox"/> DELETE	2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY- ST- ZIP		2.4 CITY- ST- ZIP	
	<input type="checkbox"/> DELETE	3.1 TITLE	
TITLE		3.2 NAME	
NAME		3.3 STREET ADDRESS	
STREET ADDRESS		3.4 CITY- ST- ZIP	
CITY- ST- ZIP		4.1 TITLE	
	<input type="checkbox"/> DELETE	4.2 NAME	
TITLE		4.3 STREET ADDRESS	
NAME		4.4 CITY- ST- ZIP	
STREET ADDRESS		5.1 TITLE	
CITY- ST- ZIP		5.2 NAME	
	<input type="checkbox"/> DELETE	5.3 STREET ADDRESS	
TITLE		5.4 CITY- ST- ZIP	
NAME		6.1 TITLE	
STREET ADDRESS		6.2 NAME	
CITY- ST- ZIP		6.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	6.4 CITY- ST- ZIP	

14. I do 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 do an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DANE LUCAS

4/27/97

904-396-1300