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 # P95000074246 (6)

4840, INC.

FILED May 12 1998 8:00am Secretary of State

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Principal Place	of Business	Mailing Address						•••	
2029 DOOMA		2029 DOOMAR DRIVE							
Tallahassee FL 32308		TALLAHASSEE FL 32308	TALLAHASSEE FL 32308			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified	L IN ITIO OF AC			
					·			İ	
	15				09/26/1995 4. FEI Number		Applied F		
	ace of Business	<u> </u>	2a. Mailing Address				Not Applie		
21		Suite, Apt. #, etc.			59-3369122	_ 61	8.75 Addition		
Suite, Apt. #, etc.		27	<u></u>		5. Certificate of Status Desired		Fee Required	ı	
City & State		City & State			6. Election Campaign Financing	•	5.00 May Be		
- 		28	├ ¬ ´		Trust Fund Contribution		Added to Fees		
23 Zip	Country	Zip	Country		8. This corporation owes or has p				
24	25		30	•	Personal Property Tax due June 30. Yes No				
	9. Name and Address of Cur	11			10. Name and Address of New R	egistered Agen	it		
Fi	AGG, THOMAS J		81	Name					
	29 DOOMAR DRIVE		82 Street Add		dress (P.O. Box Number is Not Acceptable)				
	LLAHASSEE FL 32308		Street Add		duciess (F.O. Box Number is Not Accepte	ibi o ;		.	
,,,,			83						
				ļ			T 75- 0- 4-		
			84	City		FL 85	Zip Code	i	
11. Pursuant i	to the provisions of Sections 607.	0502 and 607,1508, Florida Statute	s, the abov	e-named c	corporation submits this statement for the	purpose of cha	nging its regist	tered	
office or re	egistered agent, or both, in the S	late of Florida, Such change was a	uthorized b	y the corpo	corporation submits this statement for the oration's board of directors. I hereby acce	ept the appointn	nent as registe	red	
	in tartinar with, and accept the o	osigations or, Section 607,5000, 110	inda Oldiole						
SIGNATURE	Signature, typed or printed name of registers:	d agent and title d applicable (NOTE	Registered Ac	ent signature r	required when reinstating)	DATE			
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIR	ECTORS IN 12	2	
TITLE	P	DELETE	1.1 TITLE				Change 🔲 Ac	ddition	
NAME	THOMAS J. FLAGG		1.2 NAME						
STREET ADDRESS	2029 DOOMAR DRIVE		1.3 STREE	T ADDRESS				10	
CITY-ST-ZIP	TALLAHASSEE FL			ST-ZIP				8	
TITLE	VPST	DELETE 2.1					Change 🔲 Ad	ddition C	
NAME	ELIZABETH R FLAGG		2.2 NAME						
STREET ADDRESS			2.3 STREE	TADDRESS					
CITY-ST-ZIP	TALLAHASSEE FL		2. 4 CITY	ST-ZIP					
TITLE		DELETE	3.1 TITLE				Change 🔲 Ad	ddition	
NAME	3.2		3.2 NAME						
STREET ADDRESS			3.3 STREE	T ADDRESS					
CiTY-ST-ZIP			3.4. CITY-	ST-ZIP					
TITLE	<u></u>	DELETE	4.1 TITLE				Change A	ddition	
NAME			4. 2 NAMI	: 1					
STREET ADDRESS			4.3 STREE	T ADDRESS					
CITY-ST-ZIP			4.4 CITY-						
TITLE		DELETE	5.1 TITLE				Change A	ddition	
NAME		—	5.2 NAME						
STREET ADDRESS				T ADDRESS					
			5.4 CITY-	1					
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE	U, 211			Change A	Addition	
NAME			6.2 NAME			_		1	
			4.5 / /	T ADDRESS				- 1	
STREET ADORESS			6.4 CITY -					- 1	
CITY-ST-ZIP	certify that the information supplies	ed with this filing does not qualify for	y the exem	otion state	d in Section 119.07(3)(i), Florida Statutes.	I further certify	that the inform	nation	
indicated	an this applied conget or cumplere	mental engual report is true and acc	urate and fi	net my sint	nature shall have the same legal effect as	if made under e	bath: that I am	an I	

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the jeceiver 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 or attachment with an additions.

CICMATURE.

MAY 1, 1998

878-6190