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**

P95000091575 (7) DOCUMENT

PJL & ASSOCIATES, INC.

FILED Jan 29 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 223 CARB LANE 223 CARR LANE TALLAHASSEE FL 32312 TALLAHASSEE FL 32312 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/01/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3353409 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State **\$5.00** May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Ty Yes IN No 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BROWN, W. KIRK ESQ. 924 N. GADSDEN STREET Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32303 83 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) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITI F 1,1 TITLE ☐ Change Addition LASSANSKE, PEGGY J NAME 1.2 NAME 223 CARR LANE STREET ADDRESS 1.3 STREET ADDRESS TALLAHASSEE FL 32312 CITY-ST-ZIP 1.4 CITY-ST-ZIP __ DELETE Change Addition | 2.1 TITLE LASSANSKE, PAUL W NAME 2.2 NAME 223 CARR LANE STREET ADDRESS 2.3 STREET ADDRESS TALLAHASSEE FL 32312 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ___ Спалде ___ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition: NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption sated 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 changes, or of an axia himent with an address. BIPAULW LASSANSKE

SIGNATURE:

1/19/98

893-6396