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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-7IP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 02 1998 8:00am

Secretary of State

R2E034

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000091781 (1)

FLORIDA SOUND ENGINEERING COMPANY

Mailing Address Principal Place of Business 3016 MERCURY ROAD S JACKSONVILLE FL 32207 1000 LEGION PLACE, SUITE 1515 ORLANDO FL 32801 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/04/1995 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For Not Applicable 26 59-3348960 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt #, etc. 5, Certificate of Status Desired П Fee Required 22 27 City & State City & State \$5.00 May Be 6, Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country $Z_{\rm IP}$ Country This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent R1 Name CORPORATION SERVICE COMPANY 1201 HAYS STREET 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301-2525 83 84 Crty 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 THE TITLE SCHELL, A.J. 1.2 NAME NAME 1000 LEGION PLACE, SUITE 1515 STREET ADDRESS 13 STREET ADDRESS ORLANDO FL 32801 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE TITLE 2 1 1IILE KRUMMENACKER, DORIS 2.2 NAME NAME 1000 LEGION PLACE, SUITE 1515 STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL 32801 2. 4 DITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 31 TITLE TITLE FLEMMINGS, MARY 3.2 NAME NAME 1000 LEGION PLACE, SUITE 1515 STREET ADDRESS 3.3 STREET ADDRESS ORLANDO FL 32801 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE 4 1 TITLE Change Addition TITLE SCHELL, A.J. 4.2 NAME NAME 1000 LEGION PL, STE 1515 STREET ADDRESS 4.3 STREET ADDRESS ORLANDO FL 4 4 CHY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 51 TITLE KRUMMENACKER, DORIS K. 52 NAME NAME 1000 LEGION PL, STE 1515 53 STREET ADDRESS STREET ADDRESS ORLANDO FL 5.4 CITY - \$1 - ZIP CITY-ST-ZIP Change Addition DELETE 61 TITLE TITLE FLEMMINGS, MARY 6.2 NAME NAME 1000 LEGION PL. STE 1515 6.3 STREET ADDRESS STREET ADDRESS ORLANDO FL

6.4 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.