

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



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

**FILED**  
**Sep 04 1998 8:00am**  
**Secretary of State**

**DOCUMENT # P95000092460 (1)**

1. Corporation Name

**ADMINISTRATIVE ELEMENTS, INC.**

Principal Place of Business

P O BOX 196656  
WINTER SPRINGS FL 32719  
US

Mailing Address

P O BOX 196656  
WINTER SPRINGS FL 32719  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**12/01/1995**

4. FEI Number

**59-3357622**

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 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

**ROBERTS, L.**  
**1335 ALFONZO CIR**  
**WINTER SPRINGS FL 32708**

81 Name

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

83

84 City

**FL**

85 Zip Code

10. Name and Address of New Registered Agent

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

TITLE ☐ DELETE  
NAME **DP**  
STREET ADDRESS **SHELTON, B**  
**P O BOX 196656**  
CITY-STATE-ZIP **WINTER SPRINGS FL** **N/A**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

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NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-ZIP

**300002632003**  
**-09/04/98--01047--016**  
**\*\*\*150.00**

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:

*[Signature]*

**A-24-98**

CR2E034 (5/98)

August 25, 1998

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Florida Department of State  
Division of Corporation  
Reinstatement Division  
P. O. Box 6327  
Tallahassee, FL 32314-6327

VIA: Certified Mail w/Return Receipt Requested  
#P 226 678 914

RE: 1998 Profit Corporate Annual Report #P95000092460 (1)

Dear Reinstatement Officer:

We mailed our 1998 Profit Corporate Annual Report on April 29, 1998 to the Department of State. We inadvertently omitted marking block 12 "N/A" (relating to street address of Office/Director) as there was no change from the prior years data and we were using your preprinted form.

On or about May 25, 1998 we received a letter from the Florida Department of State dated May 21, 1998 (Letter # 898A00028660) requesting us to add the indication "N/A" to block 12. We immediately marked block 12 as instructed "N/A" and re-mailed the modified 1998 Corporate Annual Report and check in the amount of \$150.00 back to the Department of State (See copies enclosed).

We recently received a 2nd Notice 1998 Profit Corporation Annual Report Packet and telephoned the reinstatement division to determine the current status of our corporation's 1998 report. We were informed that our re-submitted 1998 Profit Corporate Annual Report had not been posted. Further we have not received our cancelled check in the amount of \$150.00 as of this date.

We respectfully request a waiving of the \$400.00 late fee for the "N/A" omission on the original 1998 Corporate Annual Report as we timely addressed this matter when notified by your letter dated May 21, 1998. Specifically, we re-mailed the modified 1998 Corporate Annual Report to the Florida Department of State the very next day.

We hereby submit an additional check in the amount of \$150.00 with the second 1998 Profit Corporate Annual Report and pray the Reinstatement Division can except it and deem the 1998 Report filing complete.

Thank you in advance for your attention to this matter.

Sincerely:

ADMINISTRATIVE ELEMENTS, INC.

by: Barbara K. Shelton, President  
Barbara K. Shelton

P. O. Box 196656, Winter Springs, FL 32719-6656

enclosure: Second 1998 Annual Report  
Cashier's Check/\$150.00  
Copy of May 21, 1998 letter, Original Annual Report and original check