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 # P95000093923 (7)

FLAGG MARKETING RESEARCH, INC.

FILED Jan 22 1998 8:00am Secretary of State

			<u></u>					
Principal Pla	ace of Business	Mailing Address				** 17719 17172 17249 1717 1891		
112 W ADAMS ST SUITE 1702 JACKSONVILLE FL 32202		112 W ADAM SUITE 1702 JACKSONVILL			DO NOT WRITE IN THIS SPACE			
US		US			3. Date Incorporated or Qualified 12/08/1995			
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Applied For		
21		26			59-3350436	Not Applicable		
Sulte, Ap	ot. #, etc.	Suite, Apt.	#, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred		
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip 24	Country 25	Ζιρ 29	30	untry	This corporation owes or has paid the cur Personal Property Tax due June 30.	rrent year Intangible Yes		
	g. Name and Address of Cu	irrent Registered Agen	t		10. Name and Address of New Registered	Agent		
FLAGG, DENNIS J 112 W ADAMS STREET				81 Name				
112 W ADAMS STREET JACKSONVILLE FL 32202				82 Street Address (P.O. Box Number is Not Acceptable)				

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.

83 84

SIGNATURE						
	Signature, typed or printed name of registered agent and fit e if applicable	(NOTE Re	egistered Agent signature	required when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFF		
TITLE	_	DELETE	1.1 TITLE		Change	Addition
NAME	FLAGG, DENNIS J		1.2 NAME			
STREET ADDRESS	112 W ADAMS STREET		1.3 STREET ADDRESS			
CRY-ST-ZIP	JACKSONVILLE FL 32202		1.4 CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	
TITLE		DELETE	2.1 TITLE		☐ Change	Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS	W •	•	
CITY-ST-ZIP			2.4 CITY-ST-ZIP			
TOLE		DELETË	3.1 TITLE		☐ Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		☐ Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CHTY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-7/P			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 or an attachment with all address.

R2E034 (10/97)

Zip Code

904.250-1155