

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

FILED
May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra S. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **P95000097862 (3)**

1. Corporation Name
KESLER, PASS & ASSOCIATES, INC.



Principal Place of Business 10407 CENTURION PARKWAY NORTH SUITE 101 JACKSONVILLE FL 32256	Mailing Address 10407 CENTURION PARKWAY NORTH SUITE 101 JACKSONVILLE FL 32256
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 12/26/1995	
				4. FEI Number 59-3355728	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent KESLER, MORTON A 10407 CENTURION PARKWAY NORTH SUITE 101 JACKSONVILLE FL 32256				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				85 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. This 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 605, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	D	KESLER, DELORES M	10407 CENTURION PARKWAY N., #101 JACKSONVILLE FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
	D	KESLER, MORTON A	10407 CENTURION PARKWAY N., #101 JACKSONVILLE FL	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	President	10407 Centurion Pkwy, N. #101	Jax FL 32256
	D	GARTNER, W. A	1660 PRUDENTIAL DRIVE, SUITE 203 JACKSONVILLE FL 32207	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	Secretary/Treasurer	10407 Centurion Pkwy, N. #101	Jax FL 32256
				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
				<input type="checkbox"/> Change <input type="checkbox"/> Addition			

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.

CR2E034 (10/97)