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PROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED May 01 1998 8:00am Secretary of State

1	1998		DIVISION OF	CORPOR		ONS			Scorciai	y O.	Lou	att
DOCU 1. Corporatio			7913 (4)									
HEDE!	Ordic Of BrottoOttrices,	1110.							1 (1881:1881 1918: 1818: 1819: 1881:1 1881:1	y aa rya hadd		
Principal Plac	e of Business	Mai	iling Address		-					 	18818	
4190 BELFOR		4190 BELFORT RD. SUITE 200 JACKSONVILLE FL 32216				1						
SUITE 200 JACKSONVILL	E E1 99216						DO NOT WRITE IN THIS SPACE					
SHONDUNTILL	FC LT 35510	9.07	ONDOMVILLE PL 32210	,			}-	3. Da	ate Incorporated or Qualified		J. 71.02	
- b			A 4 17						1/01/1996			
2. Principal P	Place of Business	2a, Mailing Address					-		Number 59-3359124			oplied For ot Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.									Additional
22		27						5 , C	ertificate of Status Desired	<u></u> _		equired
City & Stat	e	28	City & State				-		ection Campaign Financing ust Fund Contribution	П		May Be to Fees
Zip	Country		Zip	Cou	intry				is corporation owes or has pai			
24	25	29		30				Pe	ersonal Property Tax due June	30. [Yes [□ No
	g. Name and Address of Currer	nt Registe	ered Agent		81	Name		0. N	ame and Address of New Rec	istered /	Agent	
	ith, steven f I 33RD Ave. so.											
	CKSONVILLE FL 32250				82	Street	Address	(P.O.	Box Number is Not Acceptab	e)		
					83							
					84	City					85 Zip	Code
dd Directory	the security of Section 507 pfg	10 and 60:	7 4500 Florido Cartin	ib	Ц		J - 0		The state of the s	FL	1 1	
office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the oblig	of Florida ations of,	Section 607.0505, Fl	authorize orida Sta	d by tutes	the cor	poration's	s boa	rd of directors. I hereby accep	the app	ointment as	registered
SIGNATURE	Signature, typed or posited name of registered age		001	(Decision	4.4		e required w	lana sala		DATE		
12.	OFFICERS AN			13.	u Ape	III BIQLOIGIC	e reduied w		DITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12
TITLE	CCEO		DELETE		TLE		1				Change	Addition
NAME	SWISHER, A. TIPTON T			1.2 N			-					
STREET ADDRESS CITY+ST-ZIP	9163 KINGS COLONY ROAD JACKSONVILLE FL 32257				TREET ITY-S1	ADDRESS						
TITLE	78		DELETE		TLE	-211	CCEO			Chan	X Change	je Addition
NAME	roth, stephen f				2.2 NAME		ROT	Η,	STEVEN F.			
STREET ADDRESS	114 33RD AVE. SO.					address						:
CITY-ST-ZIP TITLE	JACKSONVILLE FL 32250 PD		DELETE	2.4 C	TIE	T-ZIP	 				Change	Addition
NAME	CORWIN, NANCY PARKER		Print Deterie	3.2 N/							T Amings	- Addition
STREET ADDRESS	10016 NO. LEISURE LANE					ADDRESS						
CITY-ST-ZIP	JACKSONVILLE FL 32256	·		3.4. C	ITY-S	T-ZIP	<u> </u>					
TITLE	EVP		DELETE	4.1 TI							Change	Addition
NAME PERCENT ADDRESS	PARRISH, RICHARD E 109 MEETING WAY			4. 2 N		LDODCCC						
STREET ADDRESS CITY-S1-ZIP	PONTE VEDRA BCH FL 3208	2		1	IREET / TY-ST	ADDRESS - 7/P	ļ					1
THLE			DELETE	5.1 T/		20	 				Change	Addition
NAME				5.2 N	AME							1
STREET ADDRESS						ADDAESS						{
CITY-ST-ZIP			DELETE		1Y-51	- ZIP	 				Change	Addition
TITLE			LJ DELETE	6.1 TI 6.2 NA							☐ Citange	L. AUXIIDON
STREET ADDRESS						address	1					
CITY-ST-ZIP			/	6 4 CI	TY-ST	- ZIP				_	_	
14. Thereby o	ertify that the information supplied won this annual report or supplementa	ith this file	ng mas not a alify for				ed in Sec	tion 1	19.07(3)(i), Florida Statutes. I f	urther cer	tify that the	information
officer or o	director of the corporation or the rector Block 13 if changed, or on in atlant	liver or 100	force empowered to the madress.	e ute t	his r	oport as	s required	by C	chapter 607, Florida Statutes; a	nd that m	iy name ap	pears in

SIGNATURE: ...