

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

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May 22 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000005864 (9) 1. Corporation Name FLIP IT CORPORATION, INC.			
Principal Place of Business 4150 OLD MIDDLEBURG ROAD JACKSONVILLE FL 32210		Mailing Address 4150 OLD MIDDLEBURG ROAD JACKSONVILLE FL 32210-4619	
2. Principal Place of Business 21 7731 Manassas Ct. W. Suite, Apt. #, etc.		2a. Mailing Address 26 P.O. Box 11454 Suite, Apt. #, etc.	
22 City & State 23 Jacksonville, FL Zip Country 24 32277 25 Duval		27 City & State 28 Jacksonville, FL Zip Country 29 32239 30 Duval	
9. Name and Address of Current Registered Agent CASTEEL, JAMES E 4150 OLD MIDDLEBURG ROAD JACKSONVILLE FL 32210			
10. Name and Address of New Registered Agent 81 Name Casteel, James E. 82 Street Address (P.O. Box Number is Not Acceptable) 83 1450 Sunowa Springs Trail 84 City Bryceville FL 85 Zip 32009			
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 obligation of, Section 607.0505, Florida Statutes. SIGNATURE <i>James E. Casteel</i> JAMES E. CASTEEL <i>Apr. 15, 1997</i> (DATE)			
12. OFFICERS AND DIRECTORS			
TITLE	D	☐ DELETE	
NAME	SESONA, AL		
STREET ADDRESS	7731 MANASSAS COURT, WEST		
CITY-ST-ZIP	JACKSONVILLE FL 32277		
TITLE	D	☐ DELETE	
NAME	SERVIDORI, PHILLIP J		
STREET ADDRESS	235A COMMONWEALTH AVENUE		
CITY-ST-ZIP	CHESTNUT HILL MA 02167		
TITLE	D	☐ DELETE	
NAME	AVERY, HENRY		
STREET ADDRESS	2506 ST. MICHEL COURT		
CITY-ST-ZIP	PONTE VEDRA FL 32082		
TITLE		☐ DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐ DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE	DPC	☒ Change ☐ Addition	
1.2 NAME	AL Sesona		
1.3 STREET ADDRESS	7731 Manassas Ct. W.		
1.4 CITY-ST-ZIP	Jacksonville, FL 32277		
2.1 TITLE	DV	☐ Change ☒ Addition	
2.2 NAME	James E. Casteel		
2.3 STREET ADDRESS	Rt. 2 Box 1450		
2.4 CITY-ST-ZIP	Bryceville, FL 32009		
3.1 TITLE	D	☐ Change ☒ Addition	
3.2 NAME	Ernesto Blanco		
3.3 STREET ADDRESS	36 Sandrick Road		
3.4 CITY-ST-ZIP	Belmont, MA 02176		
4.1 TITLE	D	☐ Change ☒ Addition	
4.2 NAME	Al Lutz		
4.3 STREET ADDRESS	4815 Iroquois Ave.		
4.4 CITY-ST-ZIP	Jacksonville, FL 32210		
5.1 TITLE	SV	☐ Change ☒ Addition	
5.2 NAME	Travis Guerra		
5.3 STREET ADDRESS	8687 Ivy Mill Ct.		
5.4 CITY-ST-ZIP	Jacksonville, FL 32244		
6.1 TITLE	D	☐ Change ☒ Addition	
6.2 NAME	Shirley Hartman		
6.3 STREET ADDRESS	4968 Meganwood Ln.		
6.4 CITY-ST-ZIP	Jacksonville, FL 32257		



CR2E034 (9/96)

14. I do 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: *James E. Casteel* **JAMES E. CASTEEL**

Apr 2 1997 9am 743-2823