## 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 # **P9600006864** (8)

DIAL, CORDY & ASSOCIATES, INC.

## FILED Mar 23 1998 8:00am Secretary of State

904 280-0036

Principal Place	of Business	Mailing Address		) 18 STORE IN STATE COLOR COLOR SOLIT SOLIT SOLIT SOLIT STATE STATE CHARL COLOR
50 A1A N		50 AIA N		
SUITE 110		SUITE 110		DO NOT WRITE IN THIS SPACE
PONTE VEDRA	N FL 32082	PONTE VEDRA FL 32082		3. Date Incorporated or Qualified
				01/15/1996
2. Principal Pla	ace of Business	2a. Mailing Address	<del></del>	4. FEI Number Applied For
21 115	PROFESSIONAL DRIV		YONAL DRI	
Suite, Apt. 1		Suite, Apt. #, etc.	0.0	— \$8.75 Additional
	Suite 104	27 Suite 104		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23 POME	VEDRA BEACH FL	28 PONTE VED	ra Beach	Trust Fund Contribution
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 320		29 32082 30		Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
EDWARDS, DAVID J  B1 Name John G. Cordy				
1301 RIVERPLACE BLVD B2				ddress (P.O. Box Number is Not Acceptable)
SUITE 1629				5 Professional DR. Suite 104
JACKSONVILLE FL 32207				
			84 City 2	85 Zip Code
Fonte Vedra Seach   SLOTZ-				
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 John S. Condy John C. Cordy 1-26-98				
	Signary e typed or pointed name of registered agent		ogistered Agent signature i	equired wire/ remislating/
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
TITLE	D OTTO	L. J OECCIE	1.1 TITLE	_ , _
NAME	DIAL, R. STEVE		1.2 NAME	115 PROFESSIONAL DRIVE, SUITE 104 PONTE VEDRA BEACH & 32082 Libertage Liaddition
STREET ADDRESS	50 A1A N SUITE 110		1.3 STREET ADDRESS	115 PROFESSIONAL DRIVE, SOILE MY
CITY-ST-ZIP	PONTE VEDRA FL 32082	☐ OELETE	1.4 CITY-ST-ZIP	PONTE VENKA SEA-CH, VE SECOND
TITLE	D CORPY (OLD) C		2.1 TITLE	
NAME	CORDY, JOHN G		2 2 NAME	115 PROPESSIONAL DRIVE, SUITE 104
STREET ADDRESS	50 A1A N SUITE 110		2.3 STREET ADDRESS	115 PROPESSIONAL DRIVE, SUITE 104 POINTE VEOLA BEACH, R 32082
CITY-ST-ZIP	PONTE VEDRA FL 32082	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	Change Addition
TITLE			3.2 NAME	Charge Cynasion
NAME		'		
STREET ADDRESS			3.3 STREET ADDRESS	
CITY - ST - ZIP TITLE		DELETE	3.4. CITY-ST-ZIP	Change Addition
1		present	4. 2 NAME	
NAME STREET ADDRESS			4.3 STREET ADDRESS	
			4.4 CITY - ST - ZIP	
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
-			5.4 CITY-ST-ZIP	
CHY-ST-ZIP TIFLE		DELETE	6.1 TITLE	Change Addition
		C Precit	6.2 NAME	
NAME CTREET ADDRESS			6.3 STREET ADDRESS	
STREET ADDRESS				
CITY-ST-ZIP	ertify that the information supplied with	this filing does not qualify for	6.4 CITY-ST-ZIP	d 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.				