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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mørtham 🚁

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000014115 (5)

ALBERT, ALBERT, INC. Principal Race of Business Mailing Address 17462 FRONT BEACH AU. #87 P.O. BOX 4767 SEASIDE FL 32459 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/12/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For P.D. BX 4767 59-3361760 26 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 6. Certificate of Status Desired Seaside 27 Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Seaside Trust Fund Contribution 23 28 Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 9 25 WALTON 29 9. Name and Address of Current Registered Agent Yes Personal Property Tax due June 30. 10. Name and Address of New Registered Agent ALBERT, SODETTE 8 17462 FRONT BEACH RD., #87 ALBERT YOUT. 82 P.O. BOX 4767, SEASIDE, FL 32459 LAKE PLACE 83 PANAMA CITY BEACH PL 32413 City PANAMA CITY BOAL 32413 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 charging was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with and facept the abligators of Section 607.1505, Florida Statutes. ered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICE AND DIRECTORS IN 12 CR2E034 (1097 13. TITLE DELETE 1.1 TITLE ☐ Change ALBERT, JUSY M ALBERT, JODETTE S NAME 1.2 NAME 17462 FRONT BEACH RD., #87 210 LAKE PLACE STREET ADDRESS 1.3 STREET ADDRESS PANAMA CITY BEACH FL PANAMA CITY BEACH, F 1.4 CITY - ST- ZIP CITY-ST-ZIP DELETE TITLE 2 1 TITLE ALBERT, BRUCE M NAME 2.2 NAME

210 LAKE PLACE STREET ADDRESS 2.3 STREET ADDRESS PANAMA CITY BEACH FL CITY - S1 - 7/P 2 4 City - ST - 7IP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE 41 TITLE Change Addition MAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition THTLE 6.1 TITLE NAME 6.2 NAME

CITY-ST-ZIP 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 an address.

6.3 STREET ADDRESS

STREET ADDRESS

10-231-1940

FILED

May 01 1998 8:00am

Secretary of State