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

**PROFIT CORPORATION ANNUAL REPORT** 

1998

and the second



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000022938 (0)

HIGH MARK PRODUCTIONS, INC.

## **FILED** Apr 20 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 10575 OLD DIXIE HIGHWAY 10575 OLD DIXIE HIGHWAY ST. AUGUSTINE FL 32095 ST. AUGUSTINE FL 32095 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/13/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3374917 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 29 Yes 25 Personal Property Tax due June 30. 30 Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 SMITH HULSEY & BUSEY 225 WATER STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 1800 JACKSONVILLE FL 32202 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. 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** Signature, typod or printed name of registered agent and title if applicable (NOTE Registered Agont signature required when re-instating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition TITLE 1.1 TITLE \_\_\_ Change HART, JOHN B. 1.2 NAME NAME 10575 OLD DIXIE HIGHWAY STREET ADDRESS 1.3 STREET ADDRESS ST. AUGUSTINE FL CITY-ST-ZIP 1.4 CITY - ST - ZIP **VPD** DELETE VP.D.S Addition TITLE 2.1 TITLE HART, LITA G. NAME 2.2 NAME 10575 OLD DIXIE HIGHWAY STREET ADDRESS 2.3 STREET ADDRESS ST. AUGUSTINE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP \_\_ DELETE Change Addition 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 TITLE 6.1 TITLE NAME 6.2 NAME STREET ADORESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby 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 adactment with an address.