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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000031644 (3)

GATORS ONLY NO. 4, INC.

Principal Place of Business

Mailing Address

FILED May 08 1998 8:00am Secretary of State



| 21 32/5 South Tederal Hwy Suite, Apt. #, etc. 22 36/0 23 46/0 27 Suite, Apt. #, etc. 28 Site Apt. #, etc. 29 Cly & State 30 Country Added to F 29 33/13 30 20 Site Address of New Registered Agent HEISTAND, PAUL K 21 SECOND AVENUE NORTH ST. PETERSBURG FL 33701 10 Name and Address of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its re 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 reg agent. Lam familiar with, and accept the obligations of Section 607 0505, Florida Statutes. 10 New Figure of prefed rune of hyperiored agent and tak-it applicable 11 Pursuant to the provisions of Section 607 0502 and 607 1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. Lam familiar with, and accept the obligations of Section 607 0505, Florida Statutes. SIGNATURE Signature, typic or prefed rune of hyperiored agent and tak-it applicable 10 DELETE 11 TITLE 11 TITLE 12 OFF ICERS AND DIRLCTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN HAME 14 City-St-Zip 15 TITLE 16 City-St-Zip 18 TITLE 18 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN HAME 18 TITLE ADDRESS 18 TITLE ADDRESS 18 TITLE ADDRESS 18 TITLE ADDRESS 18 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN HAME 18 TITLE 19 TITLE 19 TITLE 10 TITLE 10 TITLE 10 TITLE 11 TITLE 12 TITLE 13 TITLE 14 TITLE 15 TITLE 15 TITLE 16 TITLE 17 TITLE 18 TITLE 18 TITLE 19 TITLE 19 TITLE 19 TITLE 10 TITLE 10 TITLE 10 TITLE 11 TITLE 12 TITLE 13 TITLE 14 TITLE 15 TITLE 15 TITLE 16 TITLE 17 TITLE 18 TITLE 18 TITLE 19 TITLE 19 TIT | Suite, Apt 2 366 City & State 3 Zip | South Federal Hwy | | | DO NOT WRITE IN THIS 3. Date Incorporated or Qualified | SPACE |
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| 23 Delical Deach , FL 28 St, feters but 5 Trust Fund Contribution Added to F Zip 33483 | 3 Del ~ | | 27 | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| 24 33 493 25 U.S 29 33713 30 U.S Personal Property Tax due June 30. Yes In No. Name and Address of New Registered Agent HEISTAND, PAUL K 221 SECOND AVENUE NORTH ST. PETERSBURG FL 33701 10. Name and Address of New Registered Agent 11. Name 12. Signature Signature Signature Signature Signature OFFICERS AND DIRL CLORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE NAME HOWARD, MARY K STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33705 14. CITY-ST-ZIP TITLE DELETE 14. CITY-ST-ZIP 15. DELETE 14. CITY-ST-ZIP 15. DELETE 15. CITAGRE 16. Name 17. Name and Address of New Registered Agent 19. Name 10. Name and Address of New Registered Agent 10. Name and Address of New Register | _ ` ~~ . | ay Beach, FL | | urg, FL | , | \$5.00 May Be Added to Fees |
| HEISTAND, PAUL K 221 SECOND AVENUE NORTH ST. PETERSBURG FL 33701 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Cod 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its re 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 reg agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature: typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS IN 1.1 TITLE NAME HOWARD, MARY K STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33705 14 CITY-ST-ZIP ITILE D LEFTE 1.1 TITLE D Change C | 4 001 | 483 25 US | ─ 23412 | 114 | · · · · · · · · · · · · · · · · · · · | |
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| 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 reportion of the corporation of directors. I hereby accept the appointment as regardent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regardent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typed or printed out to dispellered agent and title diapplicable (NOTE Registered Agent signature required when relinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE Delete | 01. | . I ElEllopolia i E doi d'I | | 83 | | |
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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 suppliemental 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address.