FILE NOW: FILING FEE AFTER MAY 1ST1S \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000034072 (4)

THE CANON AGENCY. INC.

Principal Place of Business Mailing Address				4 I BEGGARAN THE MELLE WASHIN MENTH MANUAL MANUAL CONTRACT OF THE PROPERTY OF			
PO BOX 781 PO BOX 781 VENICE FL 34284-0781 VENICE FL 34284-0781							
					DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualified		
A 5	4	T-22-1-12-1-12-1-12-1-12-1-12-1-12-1-12			04/15/1996	т-т-	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	<u> </u>	plied For
81		26			65-0660751		t Applicabl
Suite, Apt. #, etc		Suitn, Apt. #, etc.			5. Certificate of Status Desired	\$8,75 A Fee Rec	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	, c , m		
Z _i p	Country 25	7 _(p)	Count	ГУ	8. This corporation owes or has paid the cu	urrent year Inta	
<u> </u>	9. Name and Address of Curre	11	[30]		10. Name and Address of New Registered		1110
	EMETT DANIEL I		В	1 Name			
PREWETT, DANIEL L 5777 BENEVA RD. SOUTH SARASOTA FL 34233				82 Street Address (P.O. Box Number is Not Acceptable)			
			-	<u>-</u>			
			8-	4 City	FL	85 Zip C	ode
11. Pursuant office or ragent I a	to the provisions of Sections 607.050 egisterod agont, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Florida Statu o of Florida, Such change was patiens of, Section 607.0505, F	ites, the abo authorized to lorida Statuti	ve-named co by the corpores.	orporation submits this statement for the purpose cration's board of directors. I hereby accept the ap	of changing its pointment as r	registered registered
SIGNATURE	Approximate control of the control o				Quired when reinstating) DATÉ		
12.	Signature, typed or printed name of registered ag	ID DIRECTORS	13.	gent signature ret	Quired when reinstaining) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	S INI 12
TOTLE	n	DELETE	1.1.TOLE		NDISTITUTO OF THE PARTY OF THE	Change	Additio
NAME	CANON, DONNA J		1.2 NAME	1			
STREET ADDRESS	945 E. DOUGLAS CT.			ET ADDRESS			
CITY-ST-ZIP	VENICE FL 34293		1.4 CITY -				
TITLE	n	DELETE	2.1 TITLE			Change	Additio
NAME	CANON, W.C.		2.2 NAME	ĭ			
STREET ADDRESS	945 E. DOUGLAS CT.			ET ADDRESS			
	VENICE FL 34293						
CITY-ST-ZIP TITLE	THINGE FE 37280	DELETE	2 4 CITY 3 1 TITLE			Change	Additio
NAME		La vectifi	3.2 NAME				
CIRFET ADDRESS				T ANNRESS			
STATES AND TRANSPORT			■ 3.3 STOP	CZ4RODRA S			

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 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.

3.4. CITY - ST- 2IP

4 3 STREET ADDRESS

5 3 STREET ADDRESS

6.3 STREET ADDRESS

5 4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 THILE 4. 2 NAME

5 1 TITLE

5 2 NAME

61 TITLE

DELETE

DELETE

DELETE

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

TITLE

NAME

NAME STREET ADDRESS

FILED

Apr 30 1998 8:00am

Secretary of State

Change

Change

Addition

Addition

Addition