

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

FILED  
Apr 17 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000034557 (4)

1. Corporation Name

PEERLESS CONSULTANTS, INC.



Principal Place of Business

Mailing Address

1123 SANDPIPER CT.  
LAKELAND FL 33813

1123 SANDPIPER CT.  
LAKELAND FL 33813

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/01/1996

4. FEI Number

59-3385277

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 1509 South Florida Avenue

Suite, Apt. #, etc.

22 Suite 2

City & State

23 Lakeland, FL

Zip

24 33803

Country

25 USA

2a. Mailing Address

26 1509 South Florida Avenue

Suite, Apt. #, etc.

27 Suite 2

City & State

28 Lakeland, FL

Zip

29 33803

Country

30 USA

9. Name and Address of Current Registered Agent

FANNIN, TERESA B  
1123 SANDPIPER CT.  
LAKELAND FL 33813

10. Name and Address of New Registered Agent

81 Name

Teresa B. Crowley

82

Street Address (P.O. Box Number is Not Acceptable)

1509 South Florida Avenue

83

Suite 2

84

City

Lakeland

FL

85

Zip Code

33803

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

*Teresa B. Crowley*  
Signature, typed or printed name of registering agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/14/98  
DATE

12. OFFICERS AND DIRECTORS

TITLE PSD ☐ DELETE

NAME FANNIN, TERESA B.  
STREET ADDRESS 1123 SANDPIPER CT.  
CITY-ST-ZIP LAKELAND FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VSD ☒ Change ☐ Addition

1.2 NAME Teresa B. Crowley  
1.3 STREET ADDRESS 1509 S. Florida Avenue, Suite 2  
1.4 CITY-ST-ZIP Lakeland, FL 33803

2.1 TITLE PD ☐ Change ☒ Addition

2.2 NAME D. Jerry Diamond  
2.3 STREET ADDRESS 1509 S. Florida Avenue, Suite 2  
2.4 CITY-ST-ZIP Lakeland, FL 33803

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
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 on an attachment with an address.

SIGNATURE *Teresa B. Crowley*

Teresa B. Crowley, VP, 4/14/98, (941) 692-5522

CR2E034 (10/97)