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

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000040296 (1)

STILES HOLDINGS AND INVESTMENT PARTNERSHIP, INC.

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



<u> </u>						
Principal Place of Business Mailing Address						
		6400 N ANDREWS AVE FT LAUDERDALE FL 3330				
				DO NOT WRITE IN THIS SPACE		
					<ol> <li>Date Incorporated or Qualified 05/10/1996</li> </ol>	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		65-0673335	Not Applicable	
Suite, Apt. #, etc. Suite		Suite, Apt. #, etc.	uite, Apt. #, etc.			- ¢9.75 Additional
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
		28			Trust Fund Contribution	Added to Fees
Zip	Country	7ip Cour		У	8. This corporation owes or has p	aid the current year Intangible
24	25		30		Personal Property Tax due Juni	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New R	egistered Agent
	JKE, BRYAN W		81	Name		
	00 N ANDREWS AVE		82 Street Ad		Address (P.O. Box Number is Not Accepta	ble)
FT	LAUDERDALE FL 33309					
			83	3		
			84	City		85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607 1508 Florida Statuta	e the abov	/a namaa	Corporation submits this atstament for the	FL bs 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, typed or printed name of registered agent end the if applicable (NOTE Registered Agent signature regurded when reinstating)  DATE						
12.	OFFICERS AND		13.	ioni aigi kildik	ADDITIONS/CHANGES TO OFFI	
TITLE	DP	DELETE	1.1 TITLE		The strong of the date of the date.	Change Addition
NAME	<b>ST</b> ILES, TERRY W		1.2 NAME			
STREET ADDRESS	6400 N ANDREWS AVE			T ADDRESS		
CITY-ST-ZIP	ET I ALINEDIALE EL		1.4 CITY-			15
TITLE			2.1 TITLE	20 20		Change Addition
NAME	<b>E</b> AGON, DOUGLAS P		2.2 NAME			
STREET ADDRESS	6400 N ANDREWS AVE		2.3 STREE	T ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		2.4 CITY-	ST-7IP		
TITLE	V DELETE 31		31 TITLE			Change Addition
NAME	Palmer, Stephen R		32 NAME			
STREET ADDRESS	6400 N ANDREWS AVE		3.3 STREE	T ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 3.4.0		3.4. CITY -	ST-ZIP		
TITLE			4.1 TITLE		VS	Change Addition
NAME	<b>SCHLEGEL</b> , PATRICIA L		4. 2 NAME		JONES, PATRICA	
STREET ADDRESS	6400 N ANDREWS AVE		4.3 STREE	T ADDRESS	6400 N ANDREWS AVE	
CITY-ST-ZIP	FT LAUDERDALE FL		4.4 CITY-5	ST-ZIP	FT LAUDERDALE, FL 3	3309
TITLE	V	DELETE	5.1 TITLE			Change Addition
NAME	STINE, JAMES W		5.2 NAME	į		
STREET ADDRESS	6400 N ANDREWS AVE		5.3 STREET	ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		5.4 CITY-5	ST-ZIP		
TITLE	ν	X DELETE	6.1 TITLE		V	Change XX Addition
NAME	COFFEY, KEVIN		6.2 NAME		DUKE, BRYAN W	
STREET ADDRESS	6400 N ANDREWS AVE		6.3 STREET	ADDRESS	6400 N ANDREWS AVE	
CITY-ST-ZIP	FT LAUDERDALE FL		6.4 CITY-5	ST-ZIP	FT LAUDERDALE FL 3330	9
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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 of supplemental 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 conforation of the reporter objustes empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes; and that my name appears in