

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

FILED  
Jun 15 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northcutt</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000041244 (0)**

1. Corporation Name

**FIRST COAST FOLIAGE, INC.**

Principal Place of Business

**4340 MICKLER RD.  
PONTE VEDRA BCH FL 32082  
US**

Mailing Address

**8 BARACUDA PLACE  
PONTE VEDRA BCH FL 32082  
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**21** Suite, Apt. #, etc.

**22** City & State

**23** Zip Country

**24** Zip Country

2a. Mailing Address

**26** Suite, Apt. #, etc.

**27** City & State

**28** Zip Country

**29** Zip Country

3. Date Incorporated or Qualified

**05/07/1996**

4. FEI Number

**59-3387898**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$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

9. Name and Address of Current Registered Agent

**BLACKARD, WILLIAM R JR.  
100 NORTH LAURA STREET  
STE 600  
JACKSONVILLE FL 32202**

10. Name and Address of New Registered Agent

**81** Name **Kimberly Taylor**

**82** Street Address (P.O. Box Number is Not Acceptable)  
**8 Barracuda Place**

**83**

**84** City **Ponte Vedra Beach FL** **85** Zip Code **32082**

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 *Kimberly G. Taylor* **President**

**5-25-98**

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

**TITLE** **PSD**  
**NAME** **TAYLOR, KIMBERLY J**  
**STREET ADDRESS** **8 BARRACUDA PLACE**  
**CITY-ST-ZIP** **PONTE VEDRA BEACH FL 32082**

☐ DELETE

**TITLE** **VD**  
**NAME** **TAYLOR, HEINRICH K**  
**STREET ADDRESS** **8 BARRACUDA PLACE**  
**CITY-ST-ZIP** **PONTE VEDRA BEACH FL 32082**

☐ DELETE

**TITLE** **D**  
**NAME** **CUNNINGHAM, JAN M**  
**STREET ADDRESS** **239 CANTER CLUB TRAIL**  
**CITY-ST-ZIP** **LONGWOOD FL 32779**

☐ DELETE

**TITLE** ☐ DELETE

**NAME** ☐ DELETE

**STREET ADDRESS** ☐ DELETE

**CITY-ST-ZIP** ☐ DELETE

**TITLE** ☐ DELETE

**NAME** ☐ DELETE

**STREET ADDRESS** ☐ DELETE

**CITY-ST-ZIP** ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

**1.1 TITLE** ☐ Change ☐ Addition

**1.2 NAME** ☐ Change ☐ Addition

**1.3 STREET ADDRESS** ☐ Change ☐ Addition

**1.4 CITY-ST-ZIP** ☐ Change ☐ Addition

**2.1 TITLE** ☐ Change ☐ Addition

**2.2 NAME** ☐ Change ☐ Addition

**2.3 STREET ADDRESS** ☐ Change ☐ Addition

**2.4 CITY-ST-ZIP** ☐ Change ☐ Addition

**3.1 TITLE** ☐ Change ☐ Addition

**3.2 NAME** ☐ Change ☐ Addition

**3.3 STREET ADDRESS** ☐ Change ☐ Addition

**3.4 CITY-ST-ZIP** ☐ Change ☐ Addition

**4.1 TITLE** ☐ Change ☐ Addition

**4.2 NAME** ☐ Change ☐ Addition

**4.3 STREET ADDRESS** ☐ Change ☐ Addition

**4.4 CITY-ST-ZIP** ☐ Change ☐ Addition

**5.1 TITLE** ☐ Change ☐ Addition

**5.2 NAME** ☐ Change ☐ Addition

**5.3 STREET ADDRESS** ☐ Change ☐ Addition

**5.4 CITY-ST-ZIP** ☐ Change ☐ Addition

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 *Kimberly G. Taylor* **President** **5-25-98**

CR2E034 (10/97)