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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 30 1997 8:00am

Secretary of State

Change

Change

Addition

Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000042336 (3)

**GRIMSLEY MARKER & ISELEY, P.A.** 

Mailing Address Principal Place of Business 50 NORTH LAURA ST. 50 NORTH LAURA ST. <del>co-barnett-cente</del>r 3400-Barnett-Center JACKSONVILLE FL 32202 JACKSONVILLE FL 32202-3664 3. Date Incorporated or Qualified 3a. Date of Last Report 05/16/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59:3378037 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 2150 BARNETT CENTER 2150 BARNETT CENTER Fee Required 27 City & State City & State 6. Election Campaign Financing **\$5.00** May Be 23 Added to Fees **Trust Fund Contribution** 28 Country 8. This corporation has liability for intangible tax under s. 199.032 32202 Yes No 24 Florida Statutes 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent RAX CO. 81 Name Robert F. Iseley, Jr. **50 NORTH LAURA STREET** Street Address (P.O. Box Number is Not Acceptable 2150 Barnett Center 82 3400 BARNETT CENTER 83 JACKSONVILLE FL 32202 50 North Laura Street 84 Jacksonville, 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. Thereby accept the appointment as registered agent. Lam/familiar with, and accept inc/obligations of Section 607 0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 1III.E **GRIMSLEY, JOHN G** NAME **1.2 NAME** P.O. BOX 4099 50 NORTH LAURA ST., # 2150 1.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32201 JACKSONVILLE, FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELFTE Change TATLE 2.1 TIBE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP TITLE DELETE 3.1 10118 Change Addition 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST - ZIP DELFTE ☐ Change TITLE 4.1 TITLE Addition 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS

14. I do 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 agreement or supplied a 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 this corporation in the corporation in the corporation in the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 on Slock 13 it shapped for on an altachment with an address.

4.4 CITY - ST - ZIP

5.3 STREET ADORESS

6.3 STREET ADDRESS

5.4 CHY+S1 ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAM8

DELETE

DECETE

SIGNATURE TO TO TOWN G. GRIMSLEY 4-25-97- 9043549000