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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #
1. Corporation Name P96000043551 (6)

T. BEATTIE ENTERPRISES. INC.

Principal Place of Business Mailing Address 7208 ALOMA AVENUE 7208 ALOMA AVENUE STE 300 STE 300 WINTER PARK FL 32792 WINTER PARK FL 32792

FILED Feb 04 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/14/1996 2. Principal Place of Business 2a, Mailing Address Applied For 21 26 Not Applicable 59-3378758 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6, Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zιρ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SIMS. DAVID A ESQ. **500 E. ALTAMONTE DRIVE** 82 Street Address (P.O. Box Number is Not Acceptable) **STE 210** 83 ALTAMONTE SPRINGS FL 32701 84 City 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 and the if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 13. DELETE Change Addition TITLE 1.1 TITLE NAME BEATTIE, RICHARD L 1.2 NAME 1220 FLOWING CREEK WAY STREET ADDRESS 1.3 STREET ADDRESS **OSTEEN FL 32764** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 22 NAME 2 3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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 to site empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with an address.

1.71.00