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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

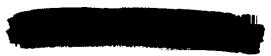
DOCUMENT #

COUCH & COPEMAN, INC.

P96000052792 (4)

□NC 12/24/97

FILED Feb 19 1998 8:00am Secretary of State



Be	yan Holoir	ng Cocqi	• • (• •		
Principal Plac	e of Business	Mailing Address			
8904 12 AVE BRADENTON US		8904 12 AVE NW Bradenton FL 34208 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				06/14/1996	
	Place of Business	2a. Mailing Address	* ext		plied For
21 3414		26 BH10 14	, , , , , , , , , , , , , , , , , , ,		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired Section 5.	
City & State	spenting PL	City & State	m, PL	6. Election Campaign Financing \$5.00 Trust Fund Contribution Added to	
24 342	Country	34207 3	Country	8. This corporation owes or has paid the current year Interpretation of the Personal Property Tax due June 30.	angible No
	9. Name and Address of Curr	·····		10. Name and Address of New Registered Agent	
COPEMAN, CRAIG A 81 Name Coping A. Cop-eman					
3307 MANATEE AVE W			82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
BRADENTON FL 34205					
			83 399	of 12 the UM	.
			84 City	85 Zip C	PP Q
11. Pursualt to be provision 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	egic ered agent, a both, in the Sta	ate of Florida. Such change was aut	thorized by the corpo	oration's board of directors. I hereby accept the appointment as i	registered
	in familiar with, and accept the ob	ligations of, Shoron 607 0505, Florid	a State s.	eplate com	
SIGNATURE	Signature, typed of print ti name of registered		Registered Agent signature re	equired when reinstating) DATE	
12.	OFFICERS A	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	S	☐ DELETE	1.1 TITLE	1. Change	Addition
NAME	COPEMAN, NANCY S		1.2 NAME	RICKY L. Copeman	
STREET ADDRESS	8904 12 AVE NW		1.3 STREET ADDRESS	3420 SHE	8
CITY-ST-ZIP TITLE	BRADENTON FL DP	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	Change	Addition
NAME	COPEMAN, CRAIG A	LJ DELETE	22 NAME	I lanine A. Cooman	LE MIGUILION
STREET ADDRESS	8904 12 AVE NW		2.3 STREET ADDRESS	4918 30 AVCE.	
CITY-ST-ZIP	BRADENTON FL			Bradenton FL 34	208
TITLE		☐ DELETE	3.1 TITLE	Change	☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		1.7295
TITLE		☐ DELETE	4.1 TITLE	Change	☐ Addition
NAME STORES ADDRESS			4. 2 NAME		İ
STREET ADDRESS			4.3 STREET ADDRESS	,	
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	Change	Addition
NAME		Д.	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	Y1\2\/19	'
CITY-ST-ZIP			5.4 City-St-ZiP	10411	
TITLE		☐ DELETE	6.1 TITLE	Change	Addition
NAME		İ	6.2 NAME	500002434865 -02/19/9801013022	1
STREET ADDRESS			6.3 STREET ADDRESS	***150.00	1
CITY-ST-ZIP			6.4 CITY-ST-ZIP	本本を100.00	

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 mont or supplied balal 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 color