## 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 # P96000063484 (5)

Mailing Address  NEPTUNE BEACH FL 32266  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  77/29/1996  2. Principal Place of Business 2. Mailing Address 3. Date Incorporated or Qualified  77/29/1996  2. Principal Place of Business 3. Date Incorporated or Qualified  77/29/1996  2. Principal Place of Business 3. Date Incorporated or Qualified  77/29/1996  3. Date Incorporated or Qualified  77/29/1996  3. Date Incorporated or Qualified  77/29/1996  4. FEI Number 59-33986855  Suite, Apt. #, etc. 27  Suite, Apt. #, etc. 27  Country 27  Country 28  29  Country 30  Country 35, 00 May be Added to Fees  This corporation owes or has paid the current yeer Intangoble Personal Peper Year due June 30.   The principal Address of Current Registered Apent  10. Name and Address of New Registered Apent  FORSYTH, ALLISON W 800-C 3RD ST NEPTUNE BEACH FL 32288  81  Sured Address (P.O. Box Number is Not Acceptable)  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 registere agent. to 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 minimize with, and accept the obligations of, Section 607 6505, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I minimize with, and accept the obligations of, Section 607 6505, Florida Statutes. The above-named corporations board of directors. I hereby accept the appointment as registered agent. I have been appointed by the corporation's board of directors. I hereby accept the appointment as registered agent. I have been appointed by the corporation's board directors. I hereby accept the appointment as registered agent. I have been appointed by the corporation's board directors. I hereby accept the appointment as registered agent. I have been appointed by the corporation's board directors. I hereby accept	ALLISC	ON W. FORSYTH, INC.					
NEPTUNE BEACH FL 32268  NEPTUNE STACE  3. Date incorporated or Qualified  17/29/1986  2. Principal Place of Business  2. Making Address  2. Making Address  3. Date incorporated or Qualified  17/29/1986  Suite, Apt. 4, otc.  5. Suite, Apt. 4, otc.  5. Suite, Apt. 4, otc.  5. Certificate of Status Desired  5. Certificate of Status Desired  6. Election Compaign Finencing  7. Additional  7. Foregund  7. Suite, Apt. 4, otc.  7. Country  7. Country  8. This composition owes or has paid the current year interactive  8. This composition owes or has paid the current year interactive  8. This composition owes or has paid the current year interactive  8. Name and Address of Current Registered Agent  FORSYTH, ALLISON W  8. Street Address (P.O. Box Number is Not Acceptable)  8. Stree	Principal Plac	e of Business	Mailing Address				i reminimen etik tiberim berest moten maret maret maret meter meter meter meter meter i den i 1911 i 1911 i 1901
2. Principal Piace of Business   2a. Mailing Address   4. FEI Number   Applied For Sy386885   Not Applied For				<b>6</b> 6			DO NOT WRITE IN THIS SPACE
2. Principal Pilece of Business   2. Mailing Address   5. Busines   4. FEI Number   59.338685   Not Applied For   59.3386855   Not Applied For   59.338685   Not Applied For   59.338685							
Suite, Apt. #, etc.    Suite, Apt. #, etc.							
Suite, Apt. #, etc. 27 City & State 30 City & State 31 City & State 32 City & State 33 City & State 34 City & State 35 City & State 36 City & State 37 Country 28 Country 29 Country 20 Country 20 Country 20 Country 30 Country 31 Country 31 Country 32 Country 32 Country 32 Country 33 Country 34 City 35 Country 36 City 36 City 36 City 37 Country 37 Country 38 Country 38 City 38 C		Place of Business	h				
City & State  Trust Fund Contribution  Added to Fees  This corporation was or has paid the current year intangible of Peersonal Property Tax due June 30.  Personal Property Tax due June 40.  Persona	Suito Ant	# oto					
City & State    City & State   City & State   City & State   City & State   City & State   City & State   City & State   City & State   City & State   City & State   Country	30ile, Apr.	#, etc.	hamen in the second sec				
Zip Country Zip Country Zip Country B. This corporation owes or has paid the current year intangible Parsonal Property Tax due June 30.    Yea   No   No   No   No   No   No   No   N	City & Stat	le	├ <b>─</b> ┐ '				
PORSYTH, ALLISON W 800-C THIRD ST NEPTUNE BEACH FL SIREET ADDRESS DITY-S1-ZP ITHE NAME SIREET ADDRESS DITY-S1-ZP ITHE DELETE SIREET ADDRESS DITY-S1-ZP THEE DELETE SIREET ADDRESS DITY-S1-ZP THE DELETE SIREET ADDRESS DITY-S1-ZP THEE DELETE SIREET ADDRESS DITY-S1		Country		Cour	itry		8. This corporation owes or has paid the current year Intangible
FORSYTH, ALLISON W 800C 3RD ST NEPTUNE BEACH FL 32268    B4	24			30			
80 C 3RD ST NEPTUNE BEACH FL 32268  81 City FL 85 Zip Code 82 Street Address (P.O. Box Number is Not Acceptable)  83 PL City FL 85 Zip Code 84 City FL 85 Zip Code 85 Zip Code 86 City FL 85 Zip Code 86 City FL 85 Zip Code 87 Zip Code 88 Zip Code 88 Zip Code 88 Zip Code 89 Zip Code 80 Zip Code 8		9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered Agent
NEPTUNE BEACH FL 32268    83					B1 N	ame	
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 agent, and accorpt the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, byted or pretent name of impetered agent and title if applicable (NOTE Registered Agent exclusive required when remarking)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  INTER  PORSYTH, ALLISON W  SIRRET ADDRESS  CITY-S1-ZIP  INTER  DELETE  11 TITLE  12 TITLE  14 STIY-S1-ZIP  DELETE  21 TITLE  23 STREET ADDRESS  CITY-S1-ZIP  MAME  SIRRET ADDRESS  CITY-S1-ZIP  DELETE  33 STREET ADDRESS  CITY-S1-ZIP  Additional Statutes.  34 CITY-S1-ZIP  Additional Statutes.  Additional Statutes.  Change Additional Statutes.  Additiona					<b>82</b> St	reet Addre	ess (P.O. Box Number is Not Acceptable)
TILE  PORSYTH, ALLISON W 800-C THRD ST NEPTUNE BEACH FL  INLE  MAME SIREET ADDRESS CITY-SI-ZIP  INLE  MAME SIREET ADDRESS CITY-SI-ZIP  MAME SIREET ADDRESS CITY-SI-ZIP  MAME MAME MAME MAME MAME MAME MAME MA	NEPTUNE BEACH FL 32268			ļ.,	-		
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 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, and accept the obligations of, Section 607 (6505, Florida Statutes).  SIGNATURE  SIGNATUR				[,	B3		
11. Pursuant to the provisions of Socions 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 Statutes, and accept the obligations of Socions 607.6505. Florida Statutes  Signature. Signature, system or present name of imperent agent and title it applicable.  (NOTE Replative society agent services and title it applicable.)  (NOTE Replative required when relevatating.)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ITIEE  P				Ī	84 C	ty	85 Zip Code
DELETE	agent. I a SIGNATURE	am familiar with, and accept the oblig	gations of, Section 607.0505, Flo	rida Statu	ites.		ed when reinstaling) DATE
NAME   FORSYTH, ALLISON W   1.2 NAME   1.3 STREET ADDRESS   CITY-SI-ZIP		OFFICERS AN					
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NAME 5.2 NAME		<u> </u>	DELETE			<del>'</del>	Channe Addition
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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 path; 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.

6.1 TITLE

6.2 NAME

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY - ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

Wism W. Forsy

DELETE

3-16-98

904-241-7511

Change Addition

**FILED** 

Mar 23 1998 8:00am

Secretary of State