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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 P96000077617 (4) DOCUMENT #

MARK COLLINS, INC.

FILED Apr 24 1997 8:00am Secretary of State



802 EIGHTH S		Mailing Address					# #
802 EIGHTH ST S 802 EIGHTH ST S							
JACKSONVILL	E FL 32250 - 4 2 1 6	JACKSONVILLE FL 32	250-4216				
					3. Date Incorporated or Qualified 09/17/1996	3a. Date of	Last Report
- Principat Pla]	ace of Business	2a. Mailing Address 26			4. FEI Number 340271	7	Applied For Not Applicab
Suite, Apt 1	#. etc	Suite, Apt. #. etc.		., ·	5. Certificate of Status Desired	\$8	3.75 Additional
City & State	;	City & State			6. Election Campaign Financing		5.00 May Be
Z _i p	Country	28 Zip	Countr	ry	Trust Fund Contribution 8. This corporation has liability for in		Added to Fees nder s. 199.032.
	25	29	30		Florida Statutes	Yes 🔀 No	
	Name and Address of Cul LLINS, MARK J	rrent Hegistered Agent	8	1 Name	10. Name and Address of New Reg	istered Agen	1
	EIGHTH ST S		82		Land /D.O. Dan Million Land Land Assessment		
JACKSONVILLE FL 32250				1	dress (P.O. Box Number is Not Acceptable)		
_			8	3			
•			84	4 City		P 85	Zip Code
. Pustingt t	o the provisions of Sections 607	0502 and 607 1508 Florida Stat	tutes the sho	ve-named cor	poration submits this statement for the pu	FL of char	noing its registers
office or re	egistered agent, or both, in the S	tate of Florida. Such change wa	is authorized t	by the corpora	tion's board of directors. I hereby accept	the appointm	ent as registered
	m familiar with, and accept the of	oligations of, Section 607.0505,	Florida Statute	es.			
GNATURE	Styr at incluyped or prints dirates of a pasterol	Fagent and title it applicable (N	IOFE: Registered A	gent signature requi	ired when reinstating)	DATE	
· •	THE TAX BEAUTIFUL AND ADDRESS OF THE PARTY O	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRE	ECTORS IN 12
	PRESIDENT	DELETE	1 1 TITLE	NAV.			hange 🔲 Additi
ME ,	MARK J COLLIN) ડ	. 1.2 NAME				
BELLADIDRESS 1	as above		1.3 STREE	ET ADORESS			
		DELETE	1.4 CITY-				
ti l	ALCR- NKG2101	2 D1 - Drugge	2.1 TITLE			L	hange 🔲 Additi
Mi L		· ·					
are a state and and	VICE- PRESIDE ALLYN COLLIN)s	2.2 NAME		,* 2	·	
HELL Y WHO PE		ls ·	2 3 STREE	ET ADORESS		÷	
KELLY VIHIGESS	active collings above		2.3 STREE 2.4 CITY	ET ADORESS - ST-ZIP	.* 2		thange Additio
th		JS DELETE	2 3 STREE 2 4 CITY 3 1 TITLE	ET ADORESS - S1-ZIP			hange Additi
EV - S.I - ZIP LF ME			23 STREE 2 4 CITY 31 TITLE 32 NAME	ET ADORESS - S1-ZIP			ihange 🔲 Additi
TEFF ASIDRESS THE TASIDRESS			23 STREE 2 4 CITY 31 TITLE 32 NAME 33 STREE	ET ADORESS - S1-ZIP ET ADORESS	. · · · · · · · · · · · · · · · · · · ·		hange Addition
TY - ST - ZP			23 STREE 2 4 CITY 31 TITLE 32 NAME	ET ADDRESS - S1-ZIP ET ADDRESS - ST-ZIP	· · · · · · · · · · · · · · · · · · ·		hange Addition
TV - ST - ZP TUF MME HEET ACIDRESS TV - ST - ZP TUF		☐ DELETE	2 3 STREF 2 4 CITY 3 1 TITLE 32 NAME 33 STREF 34. CITY	ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP			1844-1844-1844-1844-1844-1844-1844-1844
PP SLZ0 ILF MME IME LACIDHESS IV SLZ0 ILF		☐ DELETE	2 3 STREI 2 4 CITY 3 1 TITLE 32 NAME 33 STREI 34. CITY 4.1 TITLE 4.2 NAME	ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP			1844-1844-1844-1844-1844-1844-1844-1844
PRETARAMENS PRESTAR THE MANE THELE ANDRESS TOYEST ANDRESS TAYEST ANDRESS THE ANDRESS		☐ DELETE	2 3 STREI 2 4 CITY 3 1 TITLE 32 NAME 33 STREI 34. CITY 4.1 TITLE 4.2 NAME	ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP E ET ADDRESS			1844-1844-1844-1844-1844-1844-1844-1844
PRETARABLES PREST ZPE TLE ANNE THE LACIDALSS TCY - ST - ZPE TLE ANNE TREET ACIDALSS TREET ACIDALSS TY - ST - ZPE		☐ DELETE	2 3 STREI 2 4 CITY 31 TITLE 32 NAME 33 STREI 34. CITY 4.1 TITLE 4.2 NAME 4.3 STREI	ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP			1844-1844-1844-1844-1844-1844-1844-1844
PRETARABLES PRESTATOR THE TAGIONESS TOY STATOR THE TAGIONESS		☐ DELETE	2 3 STREI 2 4 CITY 3 1 TITLE 32 NAME 33 STREI 34. CITY 4.1 TITLE 4.2 NAM 43 STREI 44 CITY-	ET ADDRESS -S1-ZIP ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS			1844-1844-1844-1844-1844-1844-1844-1844
PY SL ZP ILF IMEL ACORES IV SL ZP ILF IMEL ACORES IV SL ZP ILF IMEL ACORES IV SL ZP ILF		☐ DELETE	2 3 STREI 2 4 CITY 3 1 TITLE 32 NAME 33 STREI 34 CITY 4.1 TITLE 4.2 NAME 4.3 STREI 4.4 CITY 5.1 TITLE 5.2 NAME	ET ADDRESS -S1-ZIP ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS	2		1844-1844-1844-1844-1844-1844-1844-1844
PRETARIORES PREST AND THE PRES		☐ DELETE	2 3 STREI 2 4 CITY 3 1 TITLE 32 NAME 33 STREI 34 CITY 4.1 TITLE 4.2 NAME 4.3 STREI 4.4 CITY 5.1 TITLE 5.2 NAME	ET ADDRESS -S1-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -S1-ZIP			hange Addition
CONTROL ALUMENS CONTROL ACUMENS CONTROL CONTRO		☐ DELETE	2 3 STREI 2 4 CITY 3 1 TITLE 32 NAME 33 STREI 34 CITY 4.1 TITLE 4 2 NAM 43 STREI 44 CITY 5 1 TITLE 52 NAME 53 STREI	ET ADDRESS -S1-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -S1-ZIP ET ADDRESS -S1-ZIP		67 □ c	1844-1844-1844-1844-1844-1844-1844-1844
DEVISE ZELLANDRESS DEVISE ANDRESS DEVISE ANDRESS DEVISE ANDRESS DEVISE ZELLANDRESS DEVISE ZELLANDRESS DEVISE ZELLANDRESS DEVISE ZELLANDRESS DEVISE ZELLANDRESS		☐ DELETE	2 3 STREI 2 4 CITY 3 1 TITLE 32 NAME 33 STREI 34 CITY 4.1 TITLE 4 2 NAM 4.3 STREI 4 4 CITY 5 1 TITLE 5 2 NAME 5 3 STREI 5 4 CITY	ET ADDRESS -S1-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP	4	67 □ c	hange Addition
STREET ADDRESS DEVISED ADDRESS		☐ DELETE	2 3 STREI 2 4 CITY 3 1 TITLE 3 2 NAME 3 3 STREI 3.4 CITY 4.1 TITLE 4 2 NAM 4 3 STREI 5 1 TITLE 5 2 NAME 5 3 STREI 5 4 CITY 6 1 TITLE 6 2 NAME	ET ADDRESS - S1-ZIP ET ADDRESS - ST-ZIP ET ADDRESS - ST-ZIP ET ADDRESS - S1-ZIP ET ADDRESS - S1-ZIP	ar no of 11 con	67 □ c	hange Addition
THE LANDRESS THE ANDRESS	as above	DELETE DELETE	2 3 STREI 2 4 CITY 3 1 TITLE 32 NAME 33 STREI 34 CITY 4.1 TITLE 4 2 NAME 43 STREI 44 CITY 5 1 TITLE 52 NAME 53 STREI 54 CITY 6.1 TITLE 62 NAME 63 STREI 64 CITY	ET ADDRESS -S1-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -S1-ZIP ET ADDRESS -S1-ZIP ET ADDRESS -S1-ZIP	BK Dep 165 and the section 119.07(3)(1). Florida Statutes it my signature shall have the same legal or as required by Chapter 607, Florida St		hange Addition

SIGNATURE: SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR COLLINS 4-347