

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

FILED  
Feb 12 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000077771 (9)**

1. Corporation Name  
**MILLER, TREVETT & MCCARROLL, INC.**



Principal Place of Business <b>1890 S. 14TH STREET STE. 200 FERNANDINA BEACH FL 32034 US</b>	Mailing Address <b>1890 S. 14TH STREET STE. 200 FERNANDINA BEACH FL 32034 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>09/18/1996</b>	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number <b>59-3410979</b>	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
24	Country	29	Zip	30	Country
g. Name and Address of Current Registered Agent <b>WOOD, MARSHALL E ESQ. 303 CENTRE STREET SUITE 100 FERNANDINA BEACH FL 32034</b>				10. Name and Address of New Registered Agent	

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.1 NAME
VPD	TREVETT, HARRY R.	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
1325 ATLANTIC AVE.		1.2 NAME	
FERNANDINA BEACH FL		1.3 STREET ADDRESS	
		1.4 CITY - ST - ZIP	
PD	MILLER, DAVID F	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
68 MARSH CREEK ROAD		2.1 TITLE	
AMELIA ISLAND FL		2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY - ST - ZIP	
TDS	MCCARROLL, LORIE L.	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
1890 S. 14TH STREET, STE. 200		3.1 TITLE	
FERNANDINA BEACH FL		3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY - ST - ZIP	
		4.1 TITLE	
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY - ST - ZIP	
		5.1 TITLE	
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY - ST - ZIP	
		6.1 TITLE	
		6.2 NAME	
		6.3 STREET ADDRESS	
		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 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.

SIGNATURE: *Lorie L. McCarroll, Inc.*

2/6/98 904-277-0009

CR2E034 (10/97)