

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

FILED  
Jun 30 1998 8:00 am  
Secretary of State

DOCUMENT # P96000078292 (5)

1. Corporation Name  
MICROHOST, INC.



Principal Place of Business

2955 HARTLEY ROAD  
108  
JACKSONVILLE FL 32257  
US

Mailing Address

2955 HARTLEY ROAD  
108  
JACKSONVILLE FL 32257  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 103 CENTURY 21 DRIVE

Suite, Apt. #, etc.

22 #209

City & State

23 JACKSONVILLE

Zip

24 32211

Country

25 USA

2a. Mailing Address

26 103 CENTURY 21 DRIVE

Suite, Apt. #, etc.

27 #209

City & State

28 JACKSONVILLE, FL

Zip

29 32211

Country

30 USA

3. Date Incorporated or Qualified

09/19/1996

4. FEI Number

59-3400709

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

RAX CO.  
C/O MAHONEY ADAMS & CRISER PA  
50 NO LAURA STREET 3400 BARNETT CENTER  
JACKSONVILLE FL

10. Name and Address of New Registered Agent

81 Name ~~MICROHOST, INC.~~ JULIE A. DEVANEY  
82 Street Address (P.O. Box Number is Not Acceptable)  
~~103 CENTURY 21 DRIVE, #209~~  
83 217 TRAPPER TRAIL COURT  
84 City JACKSONVILLE FL 85 Zip Code 32211

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DEVANNEY, JULIE A  
STREET ADDRESS 11861 REMSEN ROAD  
CITY-ST-ZIP JACKSONVILLE FL 32223

TITLE ☒ DELETE

NAME ANDREWS, JAMES  
STREET ADDRESS 11861 REMSEN ROAD  
CITY-ST-ZIP JACKSONVILLE FL 32223

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE SECRETARY-TREASURER ☐ Change ☒ Addition

1.2 NAME JOSEPH J. DEVANEY  
1.3 STREET ADDRESS 11861 REMSEN ROAD  
1.4 CITY-ST-ZIP JACKSONVILLE, FL 32211

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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

Signature, typed or printed name of registered agent and title if applicable

4/28/98

CR2E034 (10/97)