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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000079872 (3)

MARCUM 98 DEVELOPMENT, INC.

Principal Place of Business

Mailing Address

FILED

JAN 28 PH 12: 26

SECRETARY OF STATE TALLAMASSEE FLORIDA



| SUITE 1A TAMPA FL 33602 | | | C/O HONALD H. NOBLE ESO. 501 E. KENNEDY BLVD SUITE 1700 TAMPA FL 33602-4988 | | | |
|--|--|--------------------------------------|---|--|--|---|
| | | | | | 3. Date Incorporated or Qualified 09/25/1996 | 3a. Date of Last Report |
| 2. Princ pal F | lace of Business | 2a. Mailing Address | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 | | 26 | 26 | | 59-3406902 | Not Applicable |
| Suite, Apt. #, etc. 22 | | Suite, Apt #, etc. | 27 | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| Oity & State | | City & State | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip | Country | Zip Count | | У | 8. This corporation has liability for | |
| 24 | 25 | 29 | 30 | | Florida Statutes | |
| Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | | |
| NOI | BLE, RONALD H ESQ. | | 8 | 1 Name | | |
| | 501 E. KENNEDY BLVD. | | | | ddress (P.O. Box Number is Not Acceptable) | |
| SUITE 1700 TAMPA FL 33602 | | | | 2 Street Add | | |
| | | | | 3 | | |
| | | | ļ_ | | | |
| | | | 8- | City | | FL 85 Zip Code |
| OTHER OF F | to the provisions of Sections 607 registered agent, or both, in the S on familiar with, and accept the o | tate of Florida. Such change was | authorized b | by the corpora | poration submits this statement for the pation's board of directors. I hereby accept | |
| SIGNATURE | | | | | | |
| | So profine type disciplicated participlicage bin | r separt with sthert apple sheet (NC | TE Flagistered A | gent signature requ | ured when rainstating) | DATE |
| 12. | 1 | AND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFIC | CERS AND DIRECTORS IN 12 |
| TITLE | D | ☐ DELETE | 1.1 TITLE | d | /p/s/t | Change XX Addition |
| NAME | ROOD, EDWARD B | | 1.2 NAME | | | |
| SIREET ADDEESS | | | | T ADDRESS | | |
| CITY - ST - 749 | TAMPA FL 33602 | | 1.4 CITY- | ST-ZIP | | |
| THILE | DELETE | | 2.1 TITLE | | | Change Addition |
| NAME | | | 2.2 NAME | | gravity and the state of the st | |
| STREET ADDRESS | : : ! | | 2 3 STREE | T ADDRESS | UUUUUUU 1007/007 | |
| City - St - ZiP | | | 2. 4 CITY | - ST - <i>Z</i> IP | | 97-01155-002 5 .00 |
| TOLE ! | ! | ☐ DELETE | 3 1 TITLE | | | Change Addition |
| NAME | | | 3.2 NAME | | | |
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| NAME | | | 4 2 NAM | E . | | |
| STREET ADDRESS | | | 4 3 STREI | T ADDRESS | | |
| CITY - ST - 7i2 | | | 4.4 CITY- | ST-ZIP | | |
| TIFLE | DELETE | | | | | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | ļ. | | |
| STREET ADDRESS | | | 53 STREI | T ADDRESS | | |
| CHTY-ST-7P | | | 54 CITY- | ST-ZIP | | |
| TILE | | DELETE | 6 1 TITLE | | | Change Addition |
| NAME | | | 62 NAME | | | mwg - |
| STREET ADDRESS | | | | T ADDRESS | • | |
| CHY-SI-ZP | | | 64 CITY | | | |

14. I do 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 13 if changed, or on an attachment with an address.

SIGNATURE:

Edward B. Rood

1/23/97

(813) 229-6591

Daytime Frione #