## FILE NOW: FILING FEE AFTER MAY 1ST IS \$5

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mort

Secretary of Sta

DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P96000081020 (5)

CILLY & CO., INC.

officer or director of the corporation or Block 12 or Block 13 if changed, or op

**FILED** May 08 1998 8:00am Secretary of State



21         26         59-3404923         No           Suite, Apt. #, etc.         Suite, Apt. #, etc.         5. Certificate of Status Desired         \$8.75 A           22         27         Fee Re           City & State         8. Election Campaign Financing Trust Fund Contribution         \$5.00 Added to           23         28         Trust Fund Contribution         Added to           Zip         Country         8. This corporation owes or has paid the current year Interest.			
2. Principal Piece of Business   2a, Mailing Address   4. FEI Interpretated or Qualified   10/01/1996   3. Date Incorporated or Qualified   3. Date Incorporated   3. Date I			
2. Principal Piece of Business   2a. Mailing Address   4. FEL Number   Ap. 10/01/1998   Ap. 21   Ap. 21   Ap. 25   Suite, Apl #, etc.			
10/01/1996			
2. Principal Place of Business   2a. Mailing Address   4. FEI Number   25. S4404923   No   No   S9-3404923   No   No   S9-3404923   No   No   S9-3404923   Solito, Apit. #, etc.   Solito, Apit. #,			
Suite, Apl. #, etc.  Suite, Apl. #, etc.  Suite, Apl. #, etc.  Suite, Apl. #, etc.  City & State  City & State  City & State  Zip  Country  Zip  Zip  Country  Zip  Zip  Country  Zip  Signature, BARTLETT, BARON L  50 HIGHWAY A1A  SUITE 103  PONTE VEDRA BEACH FL 32082  13 PONTE VEDRA BEACH FL 32082  14 City  15. Pursuant to the provisions of Sections 607 0507 and 607 1508, Florida Statutes, the corporation submits this statement for the purpose of changing it is office or registered agent, or both, in the State of Fords Such change was entherized by the corporation's board of directors. I hereby accept the appointment as support to the provisions of Sections 607 0507 and 607 1508, Florida Statutes, the corporation submits this statement for the purpose of changing it is office or registered agent, or both, in the State of Fords Such change was entherized by the corporation's board of directors. I hereby accept the appointment as support to registered agent, and accept the chipations of Section 607 0505, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as support to registered agent, and accept the chipations of Section 607 0505, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as support to registered agent, and accept the chipations of Section 607 0505, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as support to registered part of the chipation of Section 607 0505, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as support to registered part or refer to provide the chipation of Section 607 0505, Florida Statutes.  SIGNATURE  12 OF FIGH RS AND DIRECTORS  13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13 SIRECT MORES  OITY-ST-ZP  TITLE  DELETE  J TITLE  J DELETE  J TITLE  J TITLE			
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BARTLETT, BARON L 50 HIGHWAY ATA SUITE 103 PONTE VEDRA BEACH FL 32082  11. Pursuant to the provisions of Sections 67 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its digital with, and accept the obligations of Sections 67 0502 and 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its digital with, and accept the obligations of Sections 67 0502 and 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its digital with, and accept the obligations of Sections 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its digital with and accept the obligations of Sections 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its digital with and accept the obligations of Sections 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its digital with and accept the obligations of Sections 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its digital statement for the purpose of changing its digi	Fees		
BARTLETT, BARON L 50 HIGHWAY ATA SUITE 103 PONTE VEDRA BEACH FL 32082  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named coporation submits this statement for the purpose of changing its 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 approximate agent, and both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appoint a registered agent, and both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as a supplication of registering agent and fix it and faculties.  SIGNATURE  Signature, liyed or prefer name or registered agent and fix it and faculties.  PSTD  OFFICE RS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE  PSTD  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  OTIV-ST-ZIP  ATLANTIC BEACH FL 32233  14. GITV-ST-ZIP  ATLANTIC BEACH FL 32233  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  15. TITLE  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  16. TITLE  16. DELETE  17. ST-ZIP  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  29. ADDITIONS/CHANGES TO OF			
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SO HIGHWAY A1A SUITE 103 PONTE VEDRA BEACH FL 32082  11. Pursuant to the provisions of Sections 607 05:02 and 607 15:08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its office of 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 a spent. I am familiar with, and accept the obligations of. Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or professional period and for it aperiodists.  PSTD OFFICERS AND DIRECTORS OFFICERS A			
SUITE 103 PONTE VEDRA BEACH FL 32082  83  84 City FL 85 Zip C  11. Pursuant to the provisions of Sections 667 0502 and 697 1508, Florida Statutas, the above-amend corporation submits this statement for the purpose of changing its office of 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 a segment of the purpose of changing its office of registered agent, and accept the obligations of, Section 697.0505, Florida Statutes.  SIGNATURE    Signature, typed or prefer traine of registered agent and the x # acquisitate   (NOTE Registered Agent agenture required registered Agent agent agent registered Agent agent agent registered Agent agent agent registered Agent agent regi			
PONTE VEDRA BEACH FL 32082  84 City FL 85 Zip C  11. Pursuant to the provisions of Sections 607 05:02 and 607 1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its office or registered agent, or both, in the State of Florida Stack change was authorized by the corporation's board of directors. I hereby accept the appointment as a gene to a mark familiar with, and accept the obligations of, Section 607 695, Florida Statutos.  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. This CISSEL, WILLIAM L  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. CITY-ST-ZIP  CISSEL, WILLIAM L  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. CITY-ST-ZIP  TITLE  DILETE  12. THE  CISSEL, WILLIAM L  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. CITY-ST-ZIP  TITLE  DILETE  22. THIS  22. THIS  22. THIS  22. SIRRET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  31. THIS  Change  THIS  CHANGE  42. NAME  42. NAME  43. SIRRET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  33. SIRRET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  41. THIS  Change  A. CITY-ST-ZIP  TITLE  CHANGE  42. NAME  43. SIRRET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  34. SIRRET ADDRESS  CITY-ST-ZIP  TITLE  CHANGE  44. SIRVEST-ZIP  TITLE  CHANGE  CHAN	ess (P.O. Box Number is Not Acceptable)		
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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 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 a submit of the purpose of changing its office or registered agent, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as a submit of the purpose of changing its office or registered agent and for its authorized by the corporation's board of directors. I hereby accept the appointment as a submit of the purpose of changing its office or registered agent and for its authorized by the corporation's board of directors. I hereby accept the appointment as a submit of the purpose of changing its office or registered agent and for its authorized by the corporation's board of directors. I hereby accept the appointment as a submit of the purpose of changing its office or registered agent and for its authorized by the corporation's board of directors. I hereby accept the appointment as a submit of the purpose of changing its office or registered agent accept the obligations of Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  PSTD  OFFICERS AND DIRECTORS  12. NAME  12. NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  JELETE	ode		
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SIGNATURE   Signature, bysiced or profest name of registered agent and for if ageshade   NOTE Registered Agent signature required when reinstalling)   DATE	registered egistered		
Signature, typed or prefet name of regulected agent and for if applicable   NOTE Registered Agent algent required Whon reinstalling)   DATE			
TITLE			
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14. Thereby certify that the information supplied with this line does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the	nformation		
indicated on this annual report or supply mental and all proof is true and accurate and that my signature shall have the same legal effect as if made under eath; that officer or director of the corporation of the corporati	I am an		