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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000084368 (5)

TAYLOR & COMPANY, INC.

FILED May 13 1998 8:00am Secretary of State



Principal Place of B	Mailing Ad	Mailing Address						
2424 GULF TO BAY BLVD. CLEARWATER FL 34625		2424 GULF TO BAY BLVD. CLEARWATER FL 34625				SO NOT WELL IN THE	200105	
						DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualified		
						10/10/1996		
2. Principal Place of	2a. Mailing Address				4. FEI Number	A	pplied For	
21		26				59-3403557	N	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional
22		27				b. Certificate of Status Desired	Fee R	equired
City & State		City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution		to Fees
Zip	Country	Zip		Country	,	8. This corporation owes or has paid the c	urrent year In	itangible
24	25	29		30		Personal Property Tax due June 30.	Yes [2 No
	Name and Address of Curren	t Registered A	gent			10. Name and Address of New Registered	d Agent	
MIZIO	VRMANDO			81	Name			
25400 US 19N SUITE 210				-				
		82 Street Ad			ddress (P.O. Box Number is Not Acceptable)			
CLEARY	VATER FL 34623			83				
				۳				
				84	City		. 85 Zip	Code
							- : :	
11. Pursuant to the	provisions of Sections 607.050	2 and 607.1508.	Florida Statute	es, the above	e-named co	orporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	of changing i	its registered
agent. I am fan	nifiar with, and accept the obliga	ations of, Section	607.0505, Flo	orida Statute	r ine corpor 3.	ration's board of directors, Thereby accept the ap	Apolitici in Ma	s registered
SIGNATURE								ţ
Signate	re, typed or printed name of registered ag-	of and tille if applicable	e (NOT	E Registered Age	ent signature req	quired when reinstating) DATE		
12.	OFFICERS AN	DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTOR	RS IN 12
TITLE D			DELETE	1.1 TITLE			Change	☐ Addition
NAME FE	ERLAND, SCOTT			1.2 NAME				
STREET ADDRESS 16	107 ALLENS RIDGE DR N			1.3 STREET	ADDRESS			
CITY-ST-ZIP PA	LM HARBOR FL 34683			1.4 CITY-S	T-7(P			!
TITLE			DELETE	2.1 TITLE			Change	Addition
NAME				2.2 NAME	1			
STREET ADDRESS				2.3 STREET	Abborod			
								ļ
CITY-ST-ZIP			DELETE	2. 4 CITY-1	ST- ZIP	1974	Change	Addition
TITLE			L DECEIE	3.1 TITLE			☐ cuanãe	LJ Addition
NAME				3.2 NAME				ļ
STREET ADDRESS				3 3 STREET	ADDRESS]
CITY-S1-ZIP				3.4. CiTY-	ST-ZIP			
TITLE			DELETE	4.1 TITLE			☐ Change	Addition
NAME				4. 2 NAME				1
STREET ADDRESS				4.3 STREET	ADDRESS			l
CITY-ST-ZIP				4.4 CITY - S	7-ZIP			
TITLE		···	DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME				5.2 NAME	1]
STREET ADDRESS				5.3 STREET	ADDRESS			
								<u> </u>
CITY-\$T-ZIP			DELETE	5.4 CITY - S 6.1 TITLE	1 - ZIF		Change	Addition
			_ DECEME				Land Charlys	L Addition
NAME				6.2 NAME				i
STREET ADDRESS				6.3 STREET	ADDRESS			l
CITY-ST-ZIP				6.4 CITY-S	T - ZiP			

14. Thereby 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 is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporationy in 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. The properties of the proper

04/30/98 (813) 724-6511