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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEFIARIMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000085522 (6)

G. DAVID BREWER, P.A.

Principal Place of Business Mailing Address 1420 SOUTH FIRST STREET 1420 SOUTH FIRST STREET LAKE CITY FL 32865 LAKE CITY FL 32065 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/15/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3407395 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 25 24 29 g. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name Brewer, G D 1420 SOUTH FIRST STREET 82 Street Address (P.O. Box Number is Not Acceptable) LAKE CITY FL 32055 83 84 City 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. Thereby accept the appointment as registered agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when re-installing) Signature, typical or printed nacic of registered agent and title if applicable (10/97) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE 1.1 T(TL) Change Addition TITLE BREWER, G D NAMI 1.2 NAME CR2E034 1420 SOUTH FIRST STREET 1.3 STREET ADDRESS STREET ADDRESS LAKE CITY FL 32055 32025 CITY-ST-ZIE 1.4 C(1Y - \$1 - ZIP DELETE Change Addition 1)11.6 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIF 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-S1-7IP 3 4. CITY - ST - ZIP DELETE Change Addition THILE 4.1 THEE NAME 4. 2 NAME STRELT ADDRESS 4.3 STHEET ADDRESS CITY - ST- ZIP 4.4 CITY - ST - ZIF DELFTE Change Addition 5.1 TITLE 52 NAME NAME STHEFT ADDRESS 5.3 STREET ADDRESS

14. Thereby certify that the information supplied with this filling 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 eath; 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 any such ment with an address.

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS 6.4 CHY-ST-7P

6.1 HTLF

6.2 NAME

DELETE

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CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

104 F

NAME

6.D. REGINE

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904

Change

Addition

FILED

Jan 15 1998 8:00am

Secretary of State