## 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 #

1. Corporation Name P96000090413 (1)

FIRST-N-COUNTERS, INC.

**FILED** May 11 1998 8:00am Secretary of State

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							<b>           </b>			
Principal Place of Business Mailing Address						- I INDICEDAL IND ABIND WITH BALLS WATER BALLS BALL BALLS BALL BALL BARN MARRY INC. 1861				
120 STOCKTO JACKSONVILL		120 STOCKTON ST JACKSONVILLE FL 32204			DO NOT WRITE	IN THIS SI	PACE			
						3. Date Incorporated or Qualified				
						10/31/1996				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	***	A	pplied For	
21		26				59-3409075		N	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired			Additional	
27						8, Certificate of Blates Desired		Fee R	equired	
City & State City & State			•			<ol><li>Election Campaign Financing</li></ol>	_		May Be	
23		28		-,		Trust Fund Contribution			to Fees	
Zip	Country	Zφ	Cou	ntry		8. This corporation owes or has pa	1		itangible   	
24	25		30	0		Personal Property Tax due June  10. Name and Address of New Re			_1 NO	
10.07	g, Name and Address of Currer	It Hedistelen want	<del></del> 1	81	Name	10. Name and Address of New No.	jietorou A	goin		
	ATHINGTON, WILLIS									
120 STOCKTON ST JACKSONVILLE FL 32204				82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)			
4040	DROUNVILLE PL 32204			83						
				84	City		FL	<b> 85 </b> Zip	Code	
office or r agent. I s SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the oblig Signature, typed or profed name of registered ag	e of Florida. Such change was all pations of, Section 607.0505, Florient and title if applicable (NOTE	uthorized rida Stat Registered	d by t utes.	he corporati	oration submits this statement for the p on's board of directors. I hereby accep ad when reinstating)	DATE	ointment as	s registered	
12.	OFFICERS AND DIRECTORS  DELETE		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOI Change	RS IN 12 Addition	
TITLE	WEATHINGTON, WILLIS	☐ DELETE	1.5 T/3				L	Change	L. J AUGILION	
NAME	3115 N LAUREL GROVE		1.2 N/							
STREET ADDRESS	JACKSONVILLE FL 32223			REET AI						
CITY-ST-ZIP TITLE	VP	☐ DELETE	_	1.4 CITY - ST - ZIP 2.1 TITLE				Change	Addition	
	WEATHINGTON, SHAME	- With		2.1 TITLE 2.2 NAME			•			
NAME OTOSET ADDRESS	10407 DOCKSIDER DR E		2.3 STREET		DODECC					
STREET ADDRESS	JACKSONVILLE FL 32257		2. 4 CITY-ST-							
CITY-ST-ZIP TITLE	ST	DELETE	_	3.1 TITLE				Change	Addition	
NAME	WEATHINGTON, HAZEL	<del></del>	3.2 NAME							
STREET ADDRESS	3115 N LAUREL GROVE		3.3 STREET		DORESS					
CITY-ST-ZIP	JACKSONMILLE FL 32223		3.4. CITY - ST-							
TITLE		☐ DELETE	4.1 TITLE					Change	Addition	
NAME			4. 2 NAME							
STREET ADDRESS			4.3 \$1	REET AL	DDRESS					
CITY-ST-ZIP			4.4 0	TY-ST-	ZiP					
TITLE		☐ DELETE	5.1 Ti	TLE				Change	Addition	
NAME			5.2 NA	AME						
STREET ADDRESS			5.3 S1	rreet al	DDRESS					
CITY-ST-ZIP			5.4 CI	TY-51-	ZIP					
TITLE		DELETE	6.1 TITLE					☐ Change	Addition	

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 supplimental 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 trusted 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 attaching the with the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certificated in Section 1

6.2 NAME 6 3 STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP