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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000097081 (9)

**NOCATEE TIMBER COMPANY, INC.** 

Principal Place of Business

Mailing Address

7006 ATLANTIC RIVIN

## **FILED** May 19 1998 8:00am Secretary of State



່ ເ	ACKSONVILL	E FL 32211-870	)6		JACKSONVILLE FL 322	11-8706			
								DO NOT WRITE IN THIS SPACE	
									3, Date Incorporated or Qualified
2. Principal Place of Business 21 Suite, Apt. #, etc.				T 24	. Mailing Address				11/25/1996 4. FEI Number Applied For
21				26				4. FEI Number Applied For Not Applicable	
				Suite, Apt. #, etc.				SR 75 Additional	
22			27	27				5. Certificate of Status Desired Fee Required	
City & State			<del></del>	Cily & State				6. Election Campaign Financing \$5.00 May Be	
23			28					Trust Fund Contribution Added to Fees	
	Zip		Country		Zip	Cour	itry		8. This corporation owes or has paid the current year Intangible
24		2		29		30			Personal Property Tax due June 30. 🔼 Yes 🗌 No
<u> </u>			nd Address of	Current Regi	stered Agent		T		10. Name and Address of New Registered Agent
		RETT, LOUI				l'	61	Name	ne
		6 ATLANTIC				1	B2	Street	eet Address (P.O. Box Number is Not Acceptable)
JACK <b>SO</b> NVILLE FL 32211-8706				06		L.	_		
						]	83		
	<u>;</u>					Ţ.	84	City	85 Zip Code
L.						<u> </u>	$\perp$		FL S P S S S S S S S S S S S S S S S S S
11	<ul> <li>Pursuant t office or re</li> </ul>	o the provisior ogi <b>ste</b> red ager	ns of Sections 6 it, or both, in If	307.0502 and t ne State of Flor	607.1508, Flo <b>rida Stat</b> t ida: Such cha <b>nge wa</b> s	utes, the ab- authorized	ove by	-named the corp	ned corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
		n f <b>am</b> iliar with,	and accept the	ic obligations of	of, Section 607. <b>0</b> 505, F	lorida Statu	tes		
SIG	GNATURE	Signature, typed or	protestance of regi	dered agent and lift	c d applicable (NC)	JTE Registered	Ager	nt signature	sture required when reinstating) DATE
12				RS AND DIRE		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TIT	.E	PV			DELETE	1.1 TITL	E		☐ Change ☐ Addition
NAI	ME	<b>E</b> VERETT,				1.2 NAM	Æ		
STR	EET ADDRESS		ANTIC BLVD			1.3 STR	EET /	ADDRESS	ss
CIT	Y-ST-ZIP	JACKSON	VILLE FL 322	11-8706		1.4 CITY	/- ST	- ZIP	
TITE	.E				DELETE	2.1 1ITL	E		V Change 🗷 Addition
NA	ME					2.2 NAN	Æ		William F. Caulkins, Sr.
STA	EET ADDRESS					2.3 STR	EET #	ADDRESS	SS 7006 Atlantic Blvd.
	Y-ST-ZIP	<del></del> .				2.4 CII	Y - S	T - ZIP	Jacksonville, Fl. 32211
TITE	1	-			☐ DELETE	3.1 TITL	E		ST Change Addition
NAI						3.2 NAN			Harlo G. Everett, Jr.
	EET ADDRESS							ADDRESS	
	Y-ST-ZIP				Doseste	3.4 CIT		- ZIP	Jacksonville, Fl. 32211
TITL					☐ DEL <b>E</b> TE	4.1 TITL			Change Addition
NAA	4					4. 2 NAI			
	EET ADDRESS							ADDRESS	58
	Y-ST-ZIP				DELETE	4.4 CITY		- ZIP	
TITL	į					5.1 THL			Change Addition
NAN	_					5.2 NAN			
	EET ADDRESS							ADDRESS	×
	r-ST-ZIP	<del></del>			DELETE	5.4 CITY		- ZIP	
TITL					L) beret	6.1 TITL			Change Addition
NAA						6.2 NAM			
	EET ADDRESS							ADDRESS	is
CITY	(-ST-ZIP		<b></b>			6.4 CITY	-ST	- 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 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 chapter 40 or on an attain inner with an address.