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

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 15 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

CHMENT #

DESIG Principal Place 7800 BAYBE	NS YOU CREATE, INC.	Mailing Address 7600 BAYBERRY ROAD JACKSONVILLE FL 3225		DO NOT WRITE IN TH  3. Date Incorporated or Qualified  12/16/1996	
2. Principal P	Place of Business	2a. Mailing Address	·	4. FEI Number	Applied For
21 26		26		59-3417966	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	<del>,</del>	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	[25]	nt Basistered Apant	30	Personal Property Tax due June 30.  10. Name and Address of New Registers	Yes X No
FULLERTON, ROBERT 7800 BAYBERRY ROAD					
JACKSONVILLE FL 32258			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	•
JA	ONGOIVILLE I L 02230		83		
			\ <u>.</u>		
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statul	les, the above-named corp	poration submits this statement for the purpose	e of changing its registered
office or r	egistered agent, or both, in the State on familiar with, and accept the oblic	e of Florida. Such change was a rations of, Section 607,0505. Fl	authorized by the corporat orida Statutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	appointment as registered
SIGNATURE		,			
	Signature, typod or photod name of registered ag		E: Registered Agont signature requir		·
12.	·····	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D DAILLYO DALMO	DELETE	11 TITLE		Change Addition
NAME	BAILYS, DAVID		1.2 NAME		
STREET ADDRESS	7800 BAYBERRY ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32256	DELETE	1,4 CITY-ST-ZIP		Change Addition
TITLE	FULLERTON, ROBERT	☐ OFFER	2.1 TITLE		Change C1 Applicat
NAME	7800 BAYBERRY ROAD		2.2 NAME		
STREET ADDRESS	JACKSONVILLE FL 32256		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME	STUTZMAN, GARY		3.2 NAME		
STREET ADDRESS	7800 BAYBERRY ROAD		3.3 STREET ADDRESS		)
CITY-ST-ZIP	JACKSONVILLE FL 32256		3 4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE	. "	DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		——————————————————————————————————————	5.4 CITY-ST-ZIP	···	01
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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 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 12 or Block 13 if changed, or on an attachment with an address.