## 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 # P96000101819 (6)

P. J. LOURCEY ENTERPRISES, INC.

## **FILED** Mar 30 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address		
925 MARTINIQUE DRIVE		925 MARTINIQUE DRIVE		
MERRITT ISLAND FL 32953		MERRITT ISLAND FL 32953		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				01/01/1997
2. Principal Pla	ace of Business	2a. Mailing Address	., <u>., ., ., ., ., .</u>	4. FEI Number Applied For
21 3815		26 3815 N. U	SHUY1 #U	6 59 3414 586 Not Applicable
Suite, Apt. #, etc.			<del> </del>	S8.75 Additional
22 POCO	<b>A</b> #06	27		5. Certificate of Status Desired Fee Required
City & State		Gily & State	· 4	6. Election Campaign Financing \$5.00 May Be
23 COCC	50 FL		- L	Trust Fund Contribution Added to Fees
Zip.	Couplry A	<sup>ZB</sup> ~ ~ ~	CountryUSA	8. This corporation owes or has paid the current year Intangible
24 (32) Y	<b>25</b> USH	29 32400 [	110 N 00	Personal Property Tax due June 30. 🔀 Yes 🔲 No
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
LOURCEY, PATRICK J   B1   Name				
AAR AMATINION IS DONE				iress (P.O. Box Number is Not Acceptable)
MERRITT ISLAND FL 32953				
83			83	
			84 City	85 Zip Code
			City	FL 63 AP COOR
11. Pursuant to	o the provisions of Sections 607.0502 ar	nd 607.1508, Florida Statutes	s, the above-named cor	rporation 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. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE	Signature, typed or printed name of registered agent are	d titic if applicable (NOTE:	Registered Agent signature requ	ured when reinstating) DATE
12.	OFFICERS AND D	IRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSD	DELETE	1.1 TITLE	Change Addition
NAME	LOURCEY, PATRICK J		1.2 NAME	
STREET ADDRESS	925 MARTINIQUE DRIVE		1.3 STREET ADDRESS	
CITY - ST - ZIP	MERRITT ISLAND FL 32953		1.4 CITY-ST-ZIP	•
TITLE		DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
TITLE		DELETE	3.1 TITLE	Change Addition
NAME		_	3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. City-St-ZiP	
TITLE		DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		<u></u>	4. 2 NAME	_ , _
			4.3 STREET ADDRESS	
STREET ADDRESS				
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	☐ Change ☐ Addition
TITLE			5.2 NAME	La stange La Addition
NAME				
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP	Change Addition
TITLE		☐ DECEIE	6.1 TITLE	C orange C Adultion
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP		11. 41	6.4 CITY-ST-ZIP	Continue (10 07/2VI) Florido Ciptutos I funtas poulti, that the information
14. I hereby c	ertify that the information supplied with t on this annual report or supplemental ar	this filling does not qualify for neual report is true and accu	the exemption stated in rate and that my signat	n Section 119.07(3)(i), Florida Statutes. I further certify that the information ture 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 changing on an attachment with an address.