## 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 # P96000103954 (9)

## FILED Apr 23 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address 6273 RIVULET RD.			
JACKSONVILI	LE PL 32238	JACKSONVILLE FL 32258	\$	DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualified	*
				01/01/1997	,
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26			V Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
27			5. Certificate of Status Desired	Fee Required	
City & State City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	
24	25		30	Personal Property Tax due June 30.	Yes 🛛 No
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Registers	d Agent
BROOKS, THOMAS W III 1301 RIVER PLACE BLVD. SUITE 2014 JACKSONVILLE FL 32207			82 Street Addr 3010 83 Jack	F	22 50 L 85 Zip Code
11. Pursuant to the provisions of Sections 60 N0502 and 607-1668. Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was authorisagent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida SIGNATURE  Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered).			ss, the above-named corporativide Statutes.  E: Registered Agent signature require	4-15-	ppointment as registered
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	<del></del>
TITLE	D	DELETE	1.3 TITLE		Change Addition
NAME	DUDLEY, JOHNNY L		1.2 NAME		
STREET ADDRESS	6273 RIVULET RD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32258		1.4 City-St-ZiP		
TITLE	D	DELETE	2.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME	ANDREWS, KIMBER L		2.2 NAME		
STREET ADDRESS	6273 RIVULET RD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32258		2. 4 CITY - ST - ZIP		i
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		<del></del>	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 TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
		- OLLEIL			C Grange C Radiiloit
NAME			6.2 NAME		ł
STREET ADDRESS			6.3 STREET ADDRESS	·	
CITY-ST-ZIP	partify that the information symplicid wi	ith this filing does not qualify fo	6.4 CITY-ST-ZIP	Section 119.07/3Vi) Florida Statutes, I further	certify that the information

4. 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.

U-11-01