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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000104024 (0)

AWERBACH & MURPHY, P.A.

PRESTIGE PLACE I. SUITE 230 PRESTIGE PLACE I. SUITE 230 2000 MCCORMICK DRIVE 2600 MCCORMICK DRIVE DO NOT WRITE IN THIS SPACE **CLEARWATER FL 34619** CLEARWATER FL 34619 3. Date Incorporated or Qualified 01/01/1997 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-3416360 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. XX Yes 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MURPHY, JEANNE F PRESTIGE PLACE I, SUITE 230 Street Address (P.O. Box Number is Not Acceptable) 2600 MCCORMICK DRIVE 83 **CLEARWATER FL 34619** 84 Zio Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE D, P 1.1 TITLE AWERBACH, MARTIN S NAME **1.2 NAME** 2600 MCCORMICK DRIVE SUITE 230 STREET ADDRESS 1.3 STREET ADDRESS CLEARWATER FL 34619 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE D, VP MURPHY, JEANNE F 2.2 NAME NAME 2600 MCCORMICK DRIVE SUITE 230 STREET ADDRESS 2.3 STREET ADDRESS **CLEARWATER FL 34619** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE ☐ Change Addition

CITY-ST-ZIP 6.4 CiTY+ST-ZIP 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.

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

62 NAME

DELETE

DELETE

DELETE

3.3 STREET ADDRESS

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

3.4. CITY - ST - ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

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CITY - ST - ZIP TITLE

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shy

3-18-98

FILED

Mar 24 1998 8:00am

Secretary of State

Change

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