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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000003443 (3)

ANDERSON & STEVENS, P.A.

Principal Place of Business Mailing Address 1301 RIVERPLACE BLVD. 1301 RIVERPLACE BLVD. **SUITE 2640** SUITE 2640 JACKSONVILLE FL 32207 DO NOT WRITE IN THIS SPACE JACKSONVILLE FL 32207 3. Date Incorporated or Qualified 01/01/1997 2. Principal Place of Business 4. FEI Number 3416 2a. Mailing Address Applied For Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box 23 Trust Fund Contribution Added to Fees Zip Country a. This corporation owes or has paid the current year Intangible Yes 29 Personal Property Tax due June 30. ☐ No 24 25 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name STEVENS, JAMES P 1301 RIVERPLACE BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 2640** JACKSONVILLE FL 32207 63 City Zip 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. Lam familiar with, and accept the obligations of Section 607.0505. Florida Statutes. SIGNATURE Signature, typost or pented name of a general Layent and the integrals able (NOTF: Flegistered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12-P, 7, D. Change OFFICERS AND DIRECTORS 12. 13. Change Addition DELFTE TITLE 1.1 TITLE ANDERSON, KENNETH G NAME 1.2 NAME 1301 RIVERPLACE BLVD., SUITE 2640 STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL 32207 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TIFLE 2.1 TITLE STEVENS, JAMES P NAME 2.2 NAME 1301 RIVERPLACE BLVD., SUITE 2640 STREET ADDRESS 23 STREET ADDRESS JACKSONVILLE FL 32207 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST-ZIP CITY - ST - ZIP Change TITLE DELETE 41 TITLE Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5 \$ TITLE NAME 52 NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME 6 3 STREET ADDRESS STREET ACCRESS 6.4 CITY-ST-ZIP 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 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 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 attagramment with an address.

SIGNATURE:

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