

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

FILED  
May 20 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000004856 (5)**

1. Corporation Name:

**TALBOT FREEMAN & ASSOC., INC.**



Principal Place of Business

Mailing Address

~~545 S. ATLANTIC BLVD~~  
~~SUITE 701~~  
FORT LAUDERDALE FL 33316

~~545 S. ATLANTIC BLVD~~  
~~SUITE 701~~  
FORT LAUDERDALE FL 33316

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21 <b>2100 S. OCEAN LANE</b>	26 <b>2100 S. OCEAN LANE</b>		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
22 <b>SUITE 2112</b>	27 <b>SUITE 2112</b>		
City & State	City & State		
23 <b>FT. LAUDERDALE, FL</b>	28 <b>FT. LAUDERDALE FL</b>		
Zip	Zip		
24 <b>33316</b>	29 <b>33316</b>		
Country	Country		
25 <b>BROWARD</b>	30 <b>BROWARD</b>		

3. Date Incorporated or Qualified

**01/13/1997**

4. FEI Number

**59-3428802**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing

☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible

Personal Property Tax due June 30.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BOSSHARDT, KURT E ESO**  
**ALLEY MAASS ROGERS & LINDSAY, PA**  
**1600 SE 17TH ST, STE 404**  
**FORT LAUDERDALE FL 33316**

81 Name

**SAME**

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the applicable date

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME **D**  
STREET ADDRESS **FREEMAN, TALBOT O III**  
CITY-ST-ZIP **545 S. ATLANTIC BLVD, STE 701**  
**FORT LAUDERDALE FL 33316**

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
ADDRESS  
ZIP

**FREE 545 333165104 1248 20 04/27/98**  
**NOTIFY SENDER OF NEW ADDRESS**  
**FREEMAN**  
**2100 S OCEAN LN APT 2112**  
**FORT LAUDERDALE FL 33316-3827**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 ADDRESS  
ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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 to this report.

SIGNATURE: **TALBOT FREEMAN** 4/24/98 954-695-6780

CR2E034 (10/97)