## 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 # P9700006321 (8)

NOR OF NORTH FLORIDA, INC.

Principal Place of Business

260 TURKEY CREEK

Mailing Address

280 TURKEY CREEK ALACHUA FL 32615

## FILED Apr 01 1998 8:00am Secretary of State



ALACHUA FL 32615	ALACHUA FL 32615		DO NOT WRITE IN THI	IS SPACE
			3. Date Incorporated or Qualified	30.7.02
			01/15/1997	
2. Principal Place of Business	2a. Mailing Address	- 41 -	4. FEI Number	Applied For
21 2300 NW 71 Place	<u> </u>	IC 15 Above	243-44-1678	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		Election Campaign Financing	\$5.00 May Be
23 Gamesvile, Fl	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the o	_ · _ ·
24 52609 25 A Jach va 9, Name and Address of Curi		30	Personal Property Tax due June 30.  10. Name and Address of New Registers	Yes No
BRASHEAR, BRUCE		81 Name	· • • • /	- I I
920 N.W. 8TH AVENUE #A		N/	ornis Q. Koszel	·
GAINESVILLE FL 32601		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
		83		
		84 City		■ 85 Zip Code
44 Dura and to the provisions of Contage 607.6	N 00 and CO7 1500 Florida Cialuta	Alac	hua F	L 82415
11. Pursuant to the provisions of Scictions 607.0502 and 607.0508, 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 Statute.				
	2	HINO S	Lose mont	25 1998
Signature, typed or printed name of registered		Registero Agont signature require	<u> </u>	
	AND DIRECTORS	13./	ADDITIONS/CHANGES TO OFFICERS A	
TITLE D	DELETE	1.1 TITLE		Change Addition
NAME BRASHEAR, BRUCE STREET ADDRESS 920 N.W. 8TH AVENUE #A		1.2 NAME		
A.III. E A. A.A.A.		1.3 STREET ADDRESS		<u> </u>
CITY-ST-ZIP GAINESVILLE FL 32601	DELETE	1.4 C)TY-ST-ZIP 2.1 TITLE		Change Addition
NAME Abunic Q. Rosa	_/	2.2 NAME		
STREET ADDRESS	le.	2.3 STREET ADDRESS		
	261	2.4 CITY-ST-ZIP		
TITLE GOO TOPES	DELETE	3.1 TITLE		Change Addition
NAME Sue N. Ruszol		3.2 NAME		
STREET ADDRESS 260 TO VERY CIVE		3.3 STREET ADDRESS		
CITY-ST-ZIP Atachus A	1 26 K	3.4. CITY-ST-ZIP		Channa T 14422
TITLE	☐ DECETE	4.1 TITLE		Change Addition
NAME Street address		4. 2 NAME 4.3 STREET ADDRESS		1
CITY-ST-ZIP		4.4 City-ST-ZIP		
TITLE	DELETE	51 TITLE		Change Addition
NAME		5.2 NAME		ļ
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-2IP		5.4 CITY-ST-ZIP		
THTLE	☐ DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZiP	Lusth this filing does not might. for	6.4 CITY-ST-ZIP	Cootion 110 07/9Vi) Florido Catutos I further	portify that the information
14. I hereby certify that the information supplied indicated on this applied report or surplement	r with this filling does not quality for otal appual resort is true and accu	rate exemption stated in S	Section 119.07(3)(1), Florida Statutes. I further a chall have the came legal effect as if made	under eath, that I am an

indicated on this annual report or sumplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or truefec employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed for on an attachment with an address.

CICNIATURE

Church Kusent

3/25/98

(352) 395-6240