## 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

## P97000023997 (4) DOCUMENT #

**DUTTON CONSULTING & SALES INC.** 

Principal Place of Business Mailing Address SOR WEVENDO MOLLOW DOAD EACT

## **FILED** Jul 09 1998 8:00am Secretary of State



JACKSONVILLE FL 32224			JACKSONVILLE FL 32224				
						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 03/18/1997	
	Place of Business	2a. Mailing Add	2a. Mailing Address			4. FEI Number Applied For	
21		26				59-3444622 (F.E.I.) Not Applicable	
Suite, Apt.	#, etc.	<u> </u>	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
City & Stat	a	City & State	City & State			Fee Required	
23	ū	<b>├</b> -₁ ´	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country		Zip Coui		·	Rotate Communion Added to Fees      Rotate Communion Added to Fees      Rotate Communion Added to Fees      Rotate Communion Added to Fees	
24	25	29	30	30		Personal Property Tax due June 30. Yes No	
9, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
AHERN, FRED L JR.				81 Name			
2215 <b>\$</b> OUTH THIRD STREET				82	Street	Address (P.O. Box Number is Not Acceptable)	
SUITE 201				-			
JA	CK <b>\$</b> ONVILLE FL 32250			83			
				84	City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Flor	ida Statutes, t	he above	-named		
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		(NOTE Rec	gistered Age	nt signature	required when reinslating) DATE	
12.	OFFICERS A	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DUTTON, DEAN T	F 1	ELETE	1.1 TITLE	,	Change Addition	
BASE WEVEOUD WOULDN' DOLD FACT				1.2 NAME			
i 1	AACKCOARRIE EL 00004			1.3 STREET			
CITY-ST-ZIP TITLE	PROTOGRAPH CELET		ELETE	1.4 CITY - S 2.1 TITLE	1 - ZIP	Change Addition	
NAME				2.2 NAME		Change Z Addition	
STREET ADDRESS				2.3 STREET	ADDDESS		
CITY-ST-ZIP				2.4 CITY-5		· ·	
TITLE				31 TITLE	71 2.11	Change Addition	
NAME	_			3.2 NAME			
STREET ADDRESS				3.3 STREFT	ADDRESS		
CITY-ST-ZIP				3.4. CITY - S	1 - ZIP		
TITLE	☐ DELETE			4.1 TITLE		Change Addition	
NAME				4. 2 NAME			
STREET ADDRESS				4.3 STREET	ADDRESS		
CITY-ST-ZIP				4.4 CITY - S	T-ZIP		
TITLE				5.1 TITLE		Change Addition	
NAME				5.2 NAME	}		
STREET ADDRESS				5.3 STREET			
CITY-ST-ZIP		D		5.4 CITY - S	- ZIP	Obs 1 4227	
TITLE		_ U		6.1 TITLE		Change Addilion	
NAME			1	6.2 NAME			
STREET ADDRESS				6.3 STREET		:	
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 eath; 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.