## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000030357 (2)

WEBHEADS, INCORPORATED

Principal Place of Business Mailing Address 3975 EMERALD CHASE 3975 EMERALD CHASE TALLAHASSEE FL 32308-5758 TALLAHASSEE FL 32308-5758

**FILED** Jul 16 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

·					04/03/1997		
2. Principal P	2a. Mailing Address	ng Address		4. FEI Number	Applied For		
21					59-3440746	Not Applicable	
Sulte, Apt.	Suite, Apt. #, etc. Suite, Apt. #, et					\$8.75 Additional	
22 27				5. Certificate of Status Desired Fee Required			
City & State City & State				6. Election Campaign Financing		\$5.00 May Be	
28					Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No		
24	25		30		Yes 🔀 No		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent COURSEV DAVID 81 Name						jent	
COURSEY, DAVID				VI Hallo			
3975 EMERALD CHASE				82 Street Address (P.O. Box Number is Not Acceptable)			
TALLAHASSEE FL 32308-5758			83	ļ <u>.</u>			
			03			Ì	
				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							
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 title if applicable (NOTE: Regis			gent signature	signature required when reinstating) DATE		
12.			13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TITLE			1.1 TITLE			Change Addition	
NAME	1		1.2 NAME				
STREET ADDRESS			1.3 STREET	ADDRESS			
CITY-ST-ZIP			1.4 CITY-ST	-ZIP			
TITLE			2.1 TITLE			Change Addition	
NAME	COURSEY, DAVID						
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP				-ZIP			
TITLE	L_ DELETE 31T			ļ		Change Addition	
NAME	32 N		3.2 NAME				
STREET ADDRESS	333		3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4 CITY-ST	-ZIP			
TITLE			4.1 TITLE	1	`	Change Addition	
NAME	I I		I.	4.2 NAME			
STREET ADORESS	1		4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST	-ZIP			
TITLE	DELETE 6.11		5.1 TITLE	1	<u></u>	Change Addition	
NAME	5.2 N		5.2 NAME				
STREET ADDRESS	ESS 5.3 ST		5.3 STREET	ADDRESS		1	
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		5.4 CITY-ST	-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change Addition	
NAME	<i>:</i>		6.2 NAME			Į	
STREET ADDRESS			6.3 STREET	ADDRESS		To the state of th	
			6.4 CITY-ST				
44 I horobu oc	etific that the Information according with	this filing stoop not qualify for the	auamatian	stated in a	postion 110 07/2\/i) Florida Statutas I further andifutha	t the information	

I mereby ceruly 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 chapter 607 or on an attachment with an address.

9/1.198

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