## 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 # P97000033476 (7)

WALTER B. DUNAGAN, P.A.

Principal Place of Business

Mailing Address

## FILED Apr 17 1998 8:00am Secretary of State



1141 SO. RIDGEWOOD AVENUE DAYTONA BEACH FL 32114			1141 SO. RIDGEWOOD AVENUE DAYTONA BEACH FL 32114				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  04/14/1997
2. Principal Place of Business 28			a. Mailing Address				4. FEI Number Applied For
21			26				59-3441779 Not Applicable
Sulte, Apt. #, etc.			Suite, Apt. #, etc.				5, Certificate of Status Desired   \$8.75 Additional Fee Required
City & State		28					6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees
Zip 24	Country 25	29	Zip	Gountry 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No
	g. Name and Address of Cur	rent Registe	ered Agent			,	10. Name and Address of New Registered Agent
Dunagan, Walter B					81	Name	
1141 SO. RIDGEWOOD AVENUE DAYTONA BEACH FL 32114				į	82	Street Addr	fress (P.O. Box Number is Not Acceptable)
ĺ				[	83		
Light Charles				. ,	64	City	FL 85 Zip Code
SIGNATURE SIGNATURE  12.  IITLE  NAME  STREET ADDRESS 1	nature, typed or printed name of registered	agent and title if AND DIRECT an Cood Av	applicable (NC ORS DELETE	11 : Registered 13. 1.1 TIT 1.2 NA	Age LE ME NEET Y-S	ent signature requit	poration submits this statement for the purpose of changing its registered attion's board of directors. I hereby accept the appointment as registered attion when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME STREET ADDRESS CITY-ST-ZIP			Dougte	2. 4 CI	REET TY-S	ADDRESS ST-2IP	
NAME STREET ADDRESS CITY-ST-ZIP	ESS DELETE				3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		Change Addition
NAME STREET ADDRESS CITY-ST-ZIP	DELETE				4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DELETE	5.1 TIT 5.2 NA	LE ME REE1 .	ADDRESS	Change Addition
NAME STREET ADDRESS CRY-ST-ZIP	it that the interesting and the		DELETE	6.1 TIT 6.2 NA	LE VIE REET	ADDRESS	Change Addition

4. I hereby certify that the information supplied with this fling does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 of 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 change, of given an attachment with an address.

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