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

CORPORATION



FLORIDA DEPARTMENT OF STATE

FILED May 28 1998 8:00am

	JAL REPORT 1998	Secretary DIVISION OF CO	of State	Secretary of State
DOCUMENT # P97000043032 1. Corporation Name				
Par 1	Three, Inc.			
Principal Place of Business Mailing Address				·
1521 Penman Road 1521 Penman F				
Jacksonville, FL 32266 Jacksonville			, FL 3226	DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 5/14/97
2. Principal Place of Business 2a. Mailing Address				4. FEI Number Applied For
21 26				59-3449234 Not Applicable
Suite, Apt		Suite, Apt. #, etc.		5. Certificate of Status Desired
City & Stat	e	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	28	Country	Added to Pees This corporation owes or has paid the current year Intangible
24	25	29	0	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
81 Name				
Timothy P. Kelly 82 Street Address (P.)				Address (P.O. Box Number is Not Acceptable)
200 East Forsyth Street 200 East Forsyth Str				East Forsyth Street
Jacksonville, FL 32202				
84 City Jacksonville				ksonville FL 85 Zip Code 32202
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 the corporation of the corporation of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of the corporation of t				
SIGNATURE Standing by the distribution of project days of proj				
12.	OF HICERS AND	DIRICTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Timothy P. Kelly	Director DELETE	1.1 TITLE	Director Change Addition
NAME	200 East Forsyth St		1.2 NAME	Timothy P. Kelly
STREET ADDRESS	Jacksonville, FL 32	2202	1.3 STREET ADDRESS	200 East Forsyth Street
CITY-ST-ZIP TITLE	Director	☐ DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	Jacksonville, FL 32202
NAME	Louis Arab	L.J DECENE	2.2 NAME	Director
	1521 Penman Road		2.3 STREET ADDRESS	Louis Arab
CITY-ST-ZIP		2266	2.4 CITY - ST - ZIP	1521 Penman Road
TITLE	Director	DELETE	3 1 TITLE	Jacksonville, FL 32266 Change Addition
NAME	Charles Price		3 2 NAME	Charles Price
STREET ADDRESS	920 Oriental Gardens		3.3 STREET ADDRESS	920 Oriental Gardens
CITY-ST-ZIP	Jacksonville, FL 32	2207 DELETE	3.4. CITY - ST - 7IP	Jookson 1110 FI 22207
TITLE			4.1 TITLE 4. 2 NAME	Change Addition
NAME STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 THLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		DESET	5.4 C(1 Y - S1 - Z)P	T Ob.
TITLE		☐ DEL E TE	6.1 TITLE	
NAME Street address			6.2 NAME 6.3 STREET ADDRESS	200002541332 PE -05/29/9801039045 5.28

14. Thereby 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 offect 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.