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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P97000051177 (8)

WORLD VIEW, INC.

Principal	Place	of	Business

Mailing Address

FILED Apr 07 1998 8:00am Secretary of State



622 11TH ST. NORTH 622 11TH ST. NORTH JACKSONVILLE FL 32250 JACKSONVILLE FL 32250 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/09/1997 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-345 Not Applicable 21 Suite Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 26 Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 25 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name O'NEILL, KAREN B 1009 21ST ST. NORTH 62 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE BEACH FL 32250 83 84 City Zip Code 85 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. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS ☐ DELETE Change ☐ Addition 1.1 TITLE TITLE COLLINS, WILLIAM A 1.2 NAME NAME **622 11TH ST. NORTH** STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL 32250 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change Addition 2.1 TITLE TITLE COLLINS, BRENDA W NAME 2.2 NAME 622 11TH ST. NORTH 2.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32250 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP ☐ Addition DELETE Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 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 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 changed, or on an attachment with an address.

Bail N 1998 904-747.706