## 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 # P97000053214 (7)

JO CLA	AIRE SPEAR, P.A.										
Principal Place	e of Business	Mailing Address				$\dashv$	T DEGLERAL FINE THE FAMIL FOOT GOVERNMENT OF F			all eith ital	
877 EXECUTIV	ve center drive west	877 EXECUTIVE CENTER	DRIVE W	FST							
SUITE 303	URG FL 33702	SUITE 303				}	DO NOT WRITE IN THIS SPACE				
0		011.707000000					3. Date Incorporated or Qualified				
						_1	06/13/1997				
2. Principal P	lace of Business	2a. Mailing Address				$\neg \neg$	4. FEI Number		A	pplied For	
21	26					59-3451340		N	ot Applicable		
Suite, Apt. #, etc.							5. Certificate of Status Desired			Additional	
22		27					<b>V.</b> 33	F	ee R	equired	
City & State	0	City & State					6. Election Campaign Financing			May Be	
23		[28]				—-↓	Trust Fund Contribution			to Fees	
Zip	Country	Zip	Cou	ntry		- [	6. This corporation owes or has paid the				
24	25   9. Name and Address of Current	29	30				Personal Property Tax due June 30.  10. Name and Address of New Register	X Yes		No	
<del></del>	<del></del>	negisteren Agent		81	Name		10. Name and Address of New Register	ed Agent			
	EAR, JO CLAIRE ESQ.				INGALIG						
877 EXECUTIVE CENTER DRIVE WEST				82 Street Add			ss (P.O. Box Number is Not Acceptable)				
	ITE 303			83							
ŞT.	PETERSBURG FL 33702			ಿ							
]				84	City			85	Zip	Code	
									L		
office or n agent. I a SIGNATURE							ation submits this statement for the purpos n's board of directors. I hereby accept the		ent as	registered	
	Signature, typed or printed name of registered agon OFFICERS AND		13.	Age	nt aignature i	rednited.	when reinstating) DAT ADDITIONS/CHANGES TO OFFICERS /		CTO	DC IN 12	
12.	D	DELETE	1.1 Tr	T) F	<sub>F</sub>	D/D	P/T/S	XX CI		Addition	
NAME	SPEAR, JO CLAIRE ESQ.		1.2 N/								
STREET ADDRESS	877 EXECUTIVE CENTER DRIV	Æ WEQT			ADDRESS	877	CAR, JO CLAIRE ESQ. 'EXECUTIVE CTR. DR. W.	. Ste	. 3	03	
1 1	ST. PETERSBURG FL 33702	IL WEST	1.4 CF		•		PETERSBURG FL 33702	,	• •	•	
CITY-ST-ZIP TITLE	SI. FEIENSBURG FL 33/02	DELETE	2.1 Til		F- 2IP	31,	TETEROBORO PE 35702	☐ Cr	hange	Addition	
NAME			2.2 NA						Юпр		
STREET ADDRESS				-	address						
1 1			1		1						
CITY-ST-ZIP		DELETE	2.4 C		51- ZIP			□ Ci	hanoe	☐ Addition	
NAME			3.2 NA								
STREET ADDRESS			1		ADDRESS						
i 1					, l						
CITY-ST-ZIP TITLE		DELETE	3.4. CI 4.1 TI		oj-Zir			Ci	nange	Addition	
NAME		L. Detric	4 2 N					_ 0,	-ar-go		
STREET ADDRESS			1		ADDRESS						
			4.4 CI								
CITY - ST - ZIP TITLE		DELETE	5.1 TII		1-4IF			☐ Ch	nande	Addition	
NAME			5.2 NA		}			5			
1 1					ADDRESS						
STREET ADDRESS											
CITY-ST-ZIP TITLE		DELETE	5.4 Cf		1-218			☐ CI	hande	Addition	
i I			6.2 NA		- 1				,ange		
NAME											
STREET ADDRESS			6.3 ST	HEE (	adoress [						

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.

SIGNATURE:

Claux Fran

April 13, 1998 (813) 578-0454

**FILED** 

Apr 16 1998 8:00am

Secretary of State