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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS City-St-Zip

CITY-ST-ZIP

TITLE NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700058405 (6)

NAN PLESSAS ARCHITECT, INC.

Principal Place of Business		Mailing Address		1 10011061 110 10111 10611 00111 00111 00111 00161 0110 10111 01111 01111
448 58TH ST. SARASOTA FL 34243-2102		448 58TH ST. Sarasota FL 34243-2102		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				07/03/1997
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For
21		26		65.0764253 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		₩ \$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25		00	Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
PLESSAS, NAN 81 Name			Name	
448 58T H ST.			82 Street Addr	ress (P.O. Box Number is Not Acceptable)
SARASOTA FL 34243-2102				
			83	
			84 City	85 Zip Code
			<u> </u>	FL Lip 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 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 proved name of registered agent and title of applicable (NOTE: Registered Agent signature required when reinstating) DATE				
			Hegistered Agent signature requir	rod when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Ď	DELETE	1.1 TITLE	Change Addition
NAME	PLESSAS, NAN		1.2 NAME	
STREET ADDRESS	448 58TH ST.		1.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34243-2102		1.4 CITY-SI-ZIP	
TITLE	ON MOOTH IE 04240-2102	DELETE	2.1 TITLE	Change Addition
NAME		and property	2.2 NAME	throat Country hand Frederick
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
TITLE	·	DELETE	3.1 TITLE	Change Addition
NAME		•	3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. City-\$1-7iP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME		had weell	4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
			4.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	51 TITLE	Change Addition
NAME			E O MANAGE	

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 logal 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.

6.4 CITY - ST - ZIP

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

all 200 1100

Change

Addition

FILED

Apr 13 1998 8:00am

Secretary of State

CR2E034 (10/97)