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FILED

Apr 21 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000059819 (7)

1. Corporation Name
PUBLIC RELATIONS, INC.



Principal Place of Business

106 SOUTH MONROE ST
TALLAHASSEE FL 32301

Mailing Address

106 SOUTH MONROE ST
TALLAHASSEE FL 32301

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 1018 THOMASVILLE RD

Suite, Apt. #, etc.

22 SUITE 100A

City & State

23 TALLAHASSEE FL

Zip

24 32303 Country

25 USA

2a. Mailing Address

26 1018 THOMASVILLE RD

Suite, Apt. #, etc.

27 SUITE 100A

City & State

28 TALLAHASSEE FL

Zip

29 32303 Country

30 USA

3. Date Incorporated or Qualified

07/09/1997

4. FEI Number

59-3462807

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

HULL, STEPHEN D
106 SOUTH MONROE ST
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name WILLIAM H. LICKSON

82 Street Address (P.O. Box Number is Not Acceptable)

1018 THOMASVILLE RD

83 SUITE 100A

84 City TALLAHASSEE

FL

85 Zip Code 32303

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]

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
NAME HULL, STEPHEN D
STREET ADDRESS 106 SOUTH MONROE ST
CITY-ST-ZIP TALLAHASSEE FL 32301

TITLE ☐ DELETE

D
NAME LICKSON, WILLIAM
STREET ADDRESS 2337 BRAEBURN CIRCLE
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DIRECTOR ☒ Change ☐ Addition

1.2 NAME HULL, STEPHEN D
1.3 STREET ADDRESS 1018 THOMASVILLE RD SUITE 100A
1.4 CITY-ST-ZIP TALLAHASSEE, FL 32303

2.1 TITLE PRESIDENT ☒ Change ☐ Addition

2.2 NAME WILLIAM H. LICKSON
2.3 STREET ADDRESS 1018 THOMASVILLE RD SUITE 100A
2.4 CITY-ST-ZIP TALLAHASSEE FL 32303

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

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.

SIGNATURE *[Signature]*

CR2E034 (10/97)