

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

FILED
Feb 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000062151 (0)**

1. Corporation Name

WALKER, KOEGLER & DILLINGHAM, P.A.



Principal Place of Business 217 PONTE VEDRA PARK DRIVE PONTE VEDRA BEACH FL 32082	Mailing Address 217 PONTE VEDRA PARK DRIVE PONTE VEDRA BEACH FL 32082
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.
Suite 200

23 City & State

24 Zip **25** Country

2a. Mailing Address

26 **PO Box 676**

Suite, Apt. #, etc.

27 City & State
Ponte Vedra Beach, FL

29 Zip **32004** **30** Country

3. Date Incorporated or Qualified

07/16/1997

4. FEI Number

59-3458487

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

**WALKER, JAMES V
217 PONTE VEDRA PARK DRIVE
PONTE VEDRA BEACH FL 32082**

10. Name and Address of New Registered Agent

81 Name

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

217 Ponte Vedra Park Drive, Suite 200

83

84 City

FL

85 Zip 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 printed name of registered agent and title, applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	WALKER, JAMES V	
STREET ADDRESS	217 PONTE VEDRA PARK DRIVE	
CITY - ST - ZIP	PONTE VEDRA BEACH FL 32082	

TITLE	D	<input type="checkbox"/> DELETE
NAME	KOEGLER, STEVEN C	
STREET ADDRESS	217 PONTE VEDRA PARK DRIVE	
CITY - ST - ZIP	PONTE VEDRA BEACH FL 32082	

TITLE	D	<input type="checkbox"/> DELETE
NAME	DILLINGHAM, PHILLIP I	
STREET ADDRESS	217 PONTE VEDRA PARK DRIVE	
CITY - ST - ZIP	PONTE VEDRA BEACH FL 32082	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	Suite 200
1.4 CITY - ST - ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	Suite 200
2.4 CITY - ST - ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	Suite 200
3.4 CITY - ST - ZIP	

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:



James V. Walker, President

2/10/98

CR2E034 (10/97)