## 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 #

P97000062597 (4)

LEAN, INC.

## FILED Apr 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address			ss			) i designet ure renti restri restri restri estiti estiti estiti estiti treni filiti i i i i i i i i i i i i i	
2530 N MONROE ST TALLAHASSEE FL 32303			2530 N MONROE ST TALLAHASSEE FL 32303			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 07/18/1997	
2. Principal P	lace of Business	2a. Mailing Ad	ldress			4. FEI Number 59 - 845 8 540	Applied For Not Applicable
Suite, Apt.	#. etc.	Suite Apt	#. etc.			-	¢0.75
22	•	27	·			5. Certificate of Status Desired	Fee Required
City & State	0	City & Sta	le			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 p	
24	25	29	30			Personal Property Tax due Jun-	<b>— — —</b> ·
	9. Name and Address of	Current Registered Ager				10. Name and Address of New R	egistered Agent
BA	LDWIN, WENDY			81	Name		
	30 N MONROE ST		82 Street Ad		Ctroot A	Address (D.O. Boy Nigether in Not Assente	(alds)
	LLAHASSEE FL 32303			02	31196L F	Address (P.O. Box Number is Not Accepta	(Die)
				83		· · · · · · · · · · · · · · · · · · ·	5 <u>4</u>
				84	City	- <del></del> -	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 Signifixer, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE							
12.		RS AND DIRECTORS	1:			ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	D		DELETE 1.	1 TITLE	Ī		Change Addition
NAME	BALDWIN, WENDY D		1.3	2 NAME			[:
STREET ADDRESS	4045 DEVLIN CT		1.3	3 STREET	ADDRESS		į.
CITY-ST-ZIP	TALLAHASSEE FL 323	08	1/	4 CITY-S	T-ZIP		
TITLE	D		DELETE 2:	1 TITLE			Change Addition
NAME	BALDWIN, GARY S		23	2 NAME			
STREET ADDRESS	4045 DEVLIN CT		2:	3 STREET	ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL 3230	08	2.	4 CITY-S	ST-ZIP		
TITLE			DELETE 3:	TITLE			Change Addition
NAME			3.2	2 NAME			ļ
STREET ADDRESS			3.3	3 STREET	ADDRESS		1
CITY-ST-ZIP			3.4	4. CITY-5	T-ZIP		
TITLE			DELETE 4.1	1 TITLE			Change Addition
NAME			4.	2 NAME			
STREET ADDRESS			4.3	3 STREET	ADDRESS		
CITY-ST-ZIP			4.6	4 CITY - S	T-ZIP		
TITLE			DELETE 5.1	1 TITLE	-		Change Addition
NAME			5.2	2 NAME	1		
STREET ADDRESS			5.3	3 STREET	ADDRESS		
CITY-ST-ZIP			5.4	4 CITY-S	T-ZIP		_
TITLE			DELETE 6.1	1 TITLE		**	Change Addition
NAME			6.2	2 NAME	ŀ		
STREET ADDRESS			6.3	3 STREET	ADDRESS		
CITY-ST-ZIP			6.4	CITY-S	T-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.

414-58 100-22