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

FILED
Oct 08 1998 8:00am
Secretary of State

DOCUMENT # **P97000069514 (2)**

1. Corporate Name
GRIFFITHS & JACKETT, C.P.A., P.A.

Principal Place of Business
904 W WATERS AVE STE D
TAMPA FL 33604

Mailing Address
904 W WATERS AVE STE D
TAMPA FL 33604

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 Street Apt. #, etc.
22 City & State
23 Zip
24 Country 25

2a. Mailing Address
26 Street Apt. #, etc.
27 City & State
28 Zip
29 Country 30

3. Date Incorporated or Qualified
08/11/1997

4. FEI Number
59-3462663 [ ] 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. [X] Yes [ ] No

9. Name and Address of Current Registered Agent
GRIFFITHS, TIMOTHY M
904 W WATERS AVE STE D
TAMPA FL 33604

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0505, and 607.1808, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or its 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 I accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS/DIRECTORS

11 Title	D	[ ] DELETE
12 Name	GRIFFITHS, TIMOTHY M	
13 Street Address	904 W WATERS AVE STE D	
14 City, St, Zip	TAMPA FL 33604	
21 Title	D	[ ] DELETE
22 Name	JACKETT, ROBERT J JR	
23 Street Address	904 W WATERS AVE STE D	
24 City, St, Zip	TAMPA FL 33604	
31 Title		[ ] DELETE
32 Name		
33 Street Address		
34 City, St, Zip		
41 Title		[ ] DELETE
42 Name		
43 Street Address		
44 City, St, Zip		
51 Title		[ ] DELETE
52 Name		
53 Street Address		
54 City, St, Zip		
61 Title		[ ] DELETE
62 Name		
63 Street Address		
64 City, St, Zip		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 Title	D, P	[X] Change [ ] Addition
12 Name		
13 Street Address		
14 City, St, Zip		
21 Title	D, V, T, S	[X] Change [ ] Addition
22 Name		
23 Street Address	7557 18 AVENUE NORTH	
24 City, St, Zip	ST. PETERSBURG, FL 33710	
31 Title		[ ] Change [ ] Addition
32 Name		
33 Street Address		
34 City, St, Zip		
41 Title		[ ] Change [ ] Addition
42 Name		
43 Street Address		
44 City, St, Zip		
51 Title		[ ] Change [ ] Addition
52 Name		
53 Street Address		
54 City, St, Zip		
61 Title		[ ] Change [ ] Addition
62 Name		
63 Street Address		
64 City, St, Zip		

14. I hereby certify that the information indicated on this report or supplemental report filed herein is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a director or officer 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 above, or on an attachment with all other like empowered officers and directors.

[illegible] 727-344-0606