## 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** #

P97000076588 (7)

11095 VIKING, INC.

Principal Place of Business Mailing Address 1801 HERMITAGE BLVD., STE. 800 1801 HERMITAGE BLVD., STE. 600 TALLAHASSEE FL 32308 TALLAHASSEE FL 32308

## **FILED** Feb 25 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/04/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3465691 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζıρ Country Country  $Z_{1D}$ 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TODO, DAVID E 1801 HERMITAGE BLVD., STE. 100 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32308 63 **64** City 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 agont, 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 (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 D DELETE TITLE 11 BULE Change ★ Addition Bruce G. Morrison NAME Douglas W. Bennett 1.2 NAME 1801 Hermitage Boulevard 335 Madison Avenue STREET ADDRESS 1.3 STREET ADDRESS Tallahassee, FL 32308 New York, NY 10017 CITY-ST-ZIP 1.4 CITY - ST- ZIP X DELETE Change X Addition T(T) F 2.1 TITLE NAME Todd A. Miller 2.2 NAME Jeffrey L. Smith STREET ADDRESS 1801 Hermitage Boulevard 2 3 STREET ADDRESS 1801 Hermitage Blvd., Suite 600 CITY-ST-ZIP Tallahassee, FL 32308 Tallahassee, FL 32308 2 4 CITY-ST-ZIP DELETE Channe Addition TITLE 3.1 TITLE Charles Grossman NAME 3.2 NAME 335 Madison Avenue STREET ADDRESS 3.3 STREET ADDRESS New York, NY 10017 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition Stephen P. Latimer NAME 4 2 NAME 335 Madison Avenue 4.3 STREET ADDRESS STREET ADDRESS New York, NY 10017 CITY-ST-ZIP 4 4 CITY-ST-ZIP TITLE DELETE 51 TITLE Change Addition James W. Horton NAME 52 NAME 1801 Hermitage Blvd. STREET ADDRESS 5.3 STREET ADDRESS Tallahassee, FL 32308 CITY-ST-ZIP 5 4 CITY - ST - ZIP DELETE 61 TITLE ☐ Change Addition TITLE NAME Luanne K. Good 6.2 NAME STREET ADORESS 1801 Hermitage Boulevard 6 3 STREET ADDRESS Tallahassee, FL 32308 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 suppliemental 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.

Dougles W