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 # P9700088733 (5) SAFETOUCH OF GEORGIA, INC.						
Principal Place of Business Mailing Address 9000 SUNBEAM CENTER DRIVE 9000 SUNBEAM CENTER DRIVI JACKSONVILLE FL 32257 JACKSONVILLE FL 32257						T (1897)000 THE FOLIA INSEL ORGAN DOUGH BOTH BOTH TOTAL INDIA LINE HAVE THE BOTH INDIA THE PROPERTY OF THE PRO
		ongriporitina i e				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
2. Principal Place of Business 2s. Mailing Address						10/14/1997 4. FEI Number Applied For
21 28						59- 34 75565 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, e						5 Certificate of Status Desired \$8.75 Additional
22 27						Fee Required
23	City & State City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution
Zip	Za Zip Zip			ıntry		Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. Yes No
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Registered Agent
	rschner, Main, Graham, T	ANNER & DEMONT		81	Name	
1	ONE INDEPENDENT DRIVE				Street Add	Idress (P.O. Box Number is Not Acceptable)
SUITE 2000				-		
JACKSONVILLE FL 32202				83	ł	
				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.6	0502 and 607 1508. Florida S	Natures the a	L	a-named co	
office or s	registered agent, or both, in the St im familiar with, and accept the ob	ate of Florida. Such change valuestions of Section 607,050	was authorize	d by	the corpora	proration submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
1	um lamiliar with, and accept the oc	nigations of, aection 607.000	o, ribilda sia	lules		
SIGNATURE	Signature, typed or printed name of registered	agent and little if applicable	(NOTE Registere	d Age	nt signature req	quired when reinstating) DATE
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D DELETE			1.1 TITLE		Change Addition
NAME JACKSON, LESTER M STREET ADDRESS 9600 SUNBEAM CENTER DRIVE				1.2 NAME		
MOVOOMBLE CL AMET		NUIAE		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	ONOROGITALLE 1E 02201	DELETE			I-ZIP	☐ Change ☐ Addition
NAME		pecel	2.1 N			C overige C Moonton
STREET ADDRESS				-	ADDRESS	
CITY-ST-ZIP					ST - ZIP	
TITLE		DELETE				Change Addition
NAME			3.2 N	AME		
STREET ADDRESS			3.3 \$1	REET	ADDRESS	
CITY-ST-ZIP					ST-ZIP	· · · · · · · · · · · · · · · · · · ·
TITLE		☐ DELETE	ſ		1	Change Addition
NAME			4. 2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP TITLE		DELETE		TY-S1	1- ZIV	Change Addition
NAME			5.2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP	i		5.4 CI		- 1	
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE				Change Addition
NAME			62 N	AME		
STREET ADDRESS			6.3 ST	REET	ADDRESS	
CITY-ST-ZIP			6.4 CI	TY - \$1	(-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 occiver 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 chapted, or of an attachment with an address.

DICMATUDE

17/08

904-268-1111

FILED

Jan 20 1998 8:00am

Secretary of State