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

P97000089426 (5) DOCUMENT # 1. Corporation Name

DEFENSIVE DRIVING INSTITUTE OF FLORIDA, INC.

Principal Place of Business

Mailing Address

FILED Jan 27 1998 8:00am Secretary of State



2880 WEST O SUITE 108 FT. LAUDERD	SUITE 10	2890 WEST OAKLAND PARK BLVD. SUITE 108 FT. LAUDERDALE FL 33311			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/16/1997			
7 / 12	A Pupinges	2a. Mailing	Address			4. FEI Number Appl	lied For	
		26				6E 0700064	Applicable	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			I & L'artificate of Status Desired I I	ate of Status Desired S8.75 Additional Fee Required	
City & State	ė		City & State			6. Election Campaign Financing \$5.00 M	lou Do	
23		28	28			Trust Fund Contribution Added to		
Zip	Country	Zip	·		ry	8. This corporation owes or has paid the current year Intan	aible	
24	25 29 30			30				
9. Name and Address of Current Registered Agen						10. Name and Address of New Registered Agent		
HA	LL, SONIA			8	1 Name			
288		-	2 Street	Address (P.O. Box Number is Not Acceptable)				
SU	TE 108		82 Street Addr			Address (F.O. box Number is Not Acceptable)		
	LAUDERDALE FL 33311			8	3	· · · · · · · · · · · · · · · · · · ·		
				_				
				6	4 City	FL 85 Zip Co	de	
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 if applicable. (NOTE: I				E Registered A	gent signature	required when reinstaling) DATE		
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I		
TITLE	D.		DELETE	1.1 TITLE		∐ Change [Addition	
NAME	HALL, SONIA			1.2 NAM	:			
STREET ADDRESS	2880 WEST OAKLAND PAR			1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL 33311				·ST-ZIP			
TITLE	D		DELETE	2.1 TITLE		☐ Change [Addition	
NAME	HARDGE, PHYLLIS			2.2 NAM	:			
STREET ADDRESS	2880 WEST OAKLAND PAI		LVD.		ET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL 3331	1		2. 4 CITY	-ST-ZIP			
TITLE			DELETE	3.1 THILE		▶ ☐ Change	Addition .	
NAME				3.2 NAM	:	Hardge, Donald		
STREET ADDRESS			3.3 STREET ADDRESS		ET ADDRESS			
CITY-ST-ZIP				3.4. CITY	-ST-ZIP	2880 W.Oakland Park Blyd. Ft. Lauderdale, FL 33311		
TITLE			DELETE	4.1 TITLE		D ☐ Change	X Addition	
NAME				4. 2 NAM	E	Hall, Mathew		
STREET ADDRESS				43 STRE	ET ADDRESS	2880 W Oakland Park Blvd.		
CITY-ST-ZIP			4.4 CITY		2880 W. Oakland Park Blvd. Ft. Lauderdale, FL 33311			
TITLE			DELETE	5.1 TITLE			Addition	
NAME			_	5.2 NAMI	1			
STREET ADDRESS					ET ADDRESS			
l					ŀ			
CITY-ST-ZIP TITLE			DELETE	5.4 CITY		Change [Addition	
i			L VIOLIL	6.1 TITLE	I	Change [Novilion	
NAME				6.2 NAMI	I			
STREET ADDRESS					ET ADDRESS			
CITY-ST-ZIP	attle that the info	Final Book and Common of the	a not a til t	6.4 CITY		d in Caption (40 07/0)(i) Florida Cast des 15 altres and des de la la	form of 5	
14. I nereby c	ertily that the information supplied	with this filing doc	is not quality to	or the exem	ption state	d in Section 119.07(3)(i), Florida Statutes. I further certify that the inf	iormation	

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.