


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Mar 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000100102 (7)**

1. Corporation Name
BASKET CASE TO THE RESCUE, INC.



Principal Place of Business 1447 JAN LANE JACKSONVILLE FL 32218	Mailing Address 1447 JAN LANE JACKSONVILLE FL 32218
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2 Independent Drive Suite, Apt. #, etc. 22 155 City & State 23 Jacksonville FL Zip 24 32202 25 Country		2a. Mailing Address 26 2 Independent Drive Suite, Apt. #, etc. 27 155 City & State 28 Jacksonville FL Zip 29 32202 30 Country		3. Date Incorporated or Qualified 11/19/1997	
		4. FEI Number 59-3486044		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent STARMER, CHRISTINA 1447 JAN LANE JACKSONVILLE FL 32218				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable) 2 INDEPENDENT DR	
				83 SUITE 155	
				84 City JAX 85 State FL Zip Code 32202	

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: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE		<input type="checkbox"/> DELETE		1.1 TITLE	P CHRISTINA STARMER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME				1.2 NAME	2 INDEPENDENT DR SUITE 155		
STREET ADDRESS				1.3 STREET ADDRESS	JAX FL 32202		
CITY-ST-ZIP				1.4 CITY-ST-ZIP	JAX FL 32202		
TITLE		<input type="checkbox"/> DELETE		2.1 TITLE	JEFF STARMER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME				2.2 NAME	2 INDEPENDENT DR SUITE 155		
STREET ADDRESS				2.3 STREET ADDRESS	JAX FL 32202		
CITY-ST-ZIP				2.4 CITY-ST-ZIP	JAX FL 32202		
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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 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.

SIGNATURE: **Christina Starmar** 3/3/98 1904/3558328

CR2E034 (10/97)