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

P97000105046 (1) DOCUMENT #
1. Corporation Name

HANCOCK PROPERTIES, INC.

FILED Feb 17 1998 8:00am Secretary of State

|--|

·				
Principal Place of Business	Mailing Address			Offic Britis Milis Office After 2004
1766 WINFIELD CIRCLE CLEARWATER FL 34616 1766 WINFIELD CIRCLE CLEARWATER FL 34616				
			DO NOT WRITE IN THIS	S SPACE
			3. Date Incorporated or Qualified	I
			12/11/1997	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26	,- <u>.</u>	59-3490024	Not Applicable
Suite, Apt. #, etc	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27			Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	28	Country	Trust Fund Contribution B. This corporation owes or has paid the contribution.	
	29	30	Personal Property Tax due June 30.	Yes No
24 25 9. Name and Address of Current		[30]	10. Name and Address of New Registere	
HANCOCK, WILLIAM T		81 Name		
1766 WINFIELD CIRCLE		OO Chront Add	tone (D.O. Doy Number is Not Accordable)	
CLEARWATER FL 34616		82 Street Add	fress (P.O. Box Number is Not Acceptable)	
OLLANIAI EN 1 E 04010		63		
		84 City		85 Zip Code
11. Pursuant to the provisions of Sections 607.0502	7.007.4500 Ft. 21. Car	4 4	and the submitted this statement for the purpose	of changing its registered
office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation	of Florida, Such change was	authorized by the corpora	ation's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE Signature, typed or person cause of registered age:	of and title of soul cable (NG	TF: Registered Agent signature requ	ured when reinstating) DATE	
12. OF LICE RS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE D	DELETE	1.1 TITLE		Change Addition
HANCOCK, WILLIAM T		1,2 NAME		
STREET ADDRESS 1768 WINFIELD CIRCLE		1.3 STREET ADDRESS		
CITY-ST-ZIP CLEARWATER FL 34616		1.4 CITY-ST-ZIP		
TITLE	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME		2.2 NAME		
STREET ADDRESS		2 3 STREET ADDRESS		
CITY-ST-ZIP		2.4 CITY-ST-ZIP		
TITLE	DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-\$1-ZIP		3.4. CITY-ST-ZIP		Change 1 Addition
TITLE	☐ DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		ļ
STREET ADDRESS		4.3 STREET ADDRESS		
CITY - S1 - ZIP	☐ DELETE	4.4 CITY-ST-ZIP		Change Addition
TITLE	LI DELETE	5.1 TITLE		— Allenge — Monton
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY - ST - ZIP	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
TITLE		6.2 NAME		
NAME				l l
STREET ADDRESS				
CITY-SI-ZIP		6.3 STREET ADDRESS 6.4 City-St-Zip		

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 attachinged by the an address;

2/10/98

813.461.0186