## 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 #** 

FILED Jun 29 1998 8:00am Secretary of State

P97000105636 (9) NRG TECH, INC. Principal Place of Business Mailing Address 7800 BELFORT PARKWAY JACKSONVILLE FL 32256 7800 BELFORT PARKWAY JACKSONVILLE FL 32256 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/16/1997 2a. Mailing Address 2. Principal Place of Business FFI Number Applied For 3480849 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired City & State 100 SVITE Fee Required 27 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. 24 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent KIRS**C**HNER MAIN GRAHAM TANNER & DEMONT PA Hollana T. MALCOLM GRAHAM 82 Street Address (P.O. Box Number is Not ONE INDEPENDENT DRIVE SUITE 2000 83 JACKSONVILLE FL 32202 85 Zip Code 07 0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of lighted Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered of bligatid of a section 607,0505, Florida Statutes.

WARM WARM 11. Pursuant to the provisions office or registered agent. SIGNATURE arm 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1 1 TITLE J. Steven Wilson 7800 Belfort PATEWAY, Ste. 100 NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS ACKSONVIIL, FL 32256 CITY-ST-ZIP 1.4 CITY-ST-ZIP Change Addition DELETE TITLE 2.1 TITLE CHTHERING T. Gray 7800 Belfort MYKUMY, Ste. 100 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 1 PL 32256 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE NAME 3.2 NAME OFF PAKKWAY. Stc. 100 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP SUCCESSION PLANGE DELETE TITLE 61 TITLE NAME 6.2 NAME -07/01/98--01011--0**38** STREET ADDRESS 6.3 STREET ADDRESS \*\*\*150.00 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 chapter 607 or on an attachment with an address

964-281-2200