## 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 # P97000108390 (0)

NANCY W. HUNT, P.A.

Principal Place of Business Mailing Address

10575 - 68TH AVE. NORTH, STE. D-2

10575 - 68TH AVE. NORTH. STE. D-2

## FILED May 01 1998 8:00am Secretary of State



SEMINOLE FL 33772		SEMINOLE FL 33772				DO NOT WRITE IN THIS SPACE		
						Date Incorporated or Qualified     12/22/1997		
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number	Ap	plied For
26						59-3486518	No	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 / Fee Re	
City & State		City & State				6. Election Campaign Financing	\$5.00	May Pa
23	•	28				Trust Fund Contribution	Added 1	
Zip	Country	Zip	Cou	intry	, . ,	8. This corporation owes or has paid the curr		
24	25	29	30	•				No
<u> </u>	9. Name and Address of Currer	1				10. Name and Address of New Registered A	gent	
	NT, NANCY W			B1	Name			
	67 <b>5 - 6</b> 8TH AVE. NORTH, STE. I	ኪዕ				(0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.		
	MINOLE FL 33772	U-2		62	Street Add	ress (P.O. Box Number is Not Acceptable)		
				63				
				84	City	FL	85 Zip (	Code
office or re agent. I as SIGNATURE	egistered agent, or both, in the State a temikar with, and accept the oblig	e of Florida. Such change was ations V. Section 907.0505, I	s authorize Florida Sta	d by tutes.	the corpora	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appointment of the purpose	98	registered
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	IS IN 12
TITLE	D	DELETE	1.1 (	ITLE			Change	Addition
NAME	HUNT, NANCY W		1.2 N	AME				
STREET ADDRESS	10575 - 68TH AVE. NORTH,	STE. D-2	1.3 S	TREET A	ADDRESS			
CITY+ST-ZIP	SEMINOLE FL 33772		1.4 C	ITY - ST	- ZIP			
TITLE		DELETE	2.1 Te	TLE			Change	Addition
NAME			2.2 N	AME				
STREET ADDRESS			2.3 S	TREET A	ADDRESS			
CITY-ST-ZIP			2.40	CITY - ST	1 - ZIP			
TITLE		DELETE	3.1 T	TLE			Change	Addition
NAME			3.2 N	AME				
STREET ADDRESS			3.3 S	TREET #	ADDRESS			
CITY-ST-ZIP			3.4. 0	CITY - SI	T-ZIP			
TITLE		☐ DELETE	4.1 ¥	ITLE			☐ Change	Addition
NAME			4.21	NAME				
STREET ADDRESS			4.3 S	TREET A	address			
CITY-ST-ZIP			4.4 C	ITY-ST	- 71P			
TITLE		DELETE	5.1 Ti	ITLE			Change	☐ Addition
NAME			52 N	IAME				
STREET ADDRESS			53S	TREET A	address			
CITY-ST-ZIP			540	ITY-SI	- ZIP		—	
TITLE		DELETE	617	ITLE			☐ Change	☐ Addition
NAME			62 N	IAME				
STREET ADDRESS			6.3 S	TREET /	ADDRESS			
CITY-ST-ZIP			6.4 C	OTY-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 type 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 trusted ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged or on an attachment with an andress.

Changed of on an attachment with an apturess.

/11 /98 813-393-947