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

PROFIT CORPORATION ANNUAL REPORT

1**9**98

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARAMENT OF STATE

Sandra B. Mortham

FILED

Jun 15 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000108520 (2)

ADMINISTRATIVE SERVICES OF NORTH FLORIDA, INC.

Principal Place of Business Mailing Address 302 THIRD ST., \$TE. 5 302 THIRD ST., STE. 5 **NEPTUNE BEACH FL 32266** NEPTUNE BEACH FL 32266 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/30/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 Not Applicable Suite, Apl. #. etc Suite, Apt #, etc \$8,75 Additional 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country $Z_{\rm ID}$ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 25 29 30 Personal Property Tax due June 30. ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BERNEUTER, CHARLES H III 81 Name 302 THIRD ST., STE. 5 82 Street Address (P.O. Box Number is Not Acceptable) NEPTUNE BEACH FL 32266 83 84 City Zip Code 85 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OLFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 🔲 DELETË Change TITLE 1.1 IIIU Addition PAMELA R. GERS NAME 12 NAME 302 THIRD ST. STREET ADDRESS 13 STREET ADDRESS CITY-ST-ZIP 14 CITY-ST-7/P DELETE TITLE 21 HTCF ☐ Change Addition Charlotte H. BURNROUTER NAME 2.2 NAME THIRD ST. STREET ADDRESS 2.3 STREET ADDRESS 32266 CITY-ST-ZIF 2. 4 City - St - ZiP TITLE Channe Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 101.6 ddition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE Addition 5.1 THLE NAME 5.2 NAME

14. Thereby 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 agreed 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 flight growthat or the recurrent or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the Block 12 or Block 13 is nent with an address

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

-06/16/38--01088--015

***150,00

Addition

5.4 CITY - ST - 7(P

6.1 TITLE

6.2 NAME

DELETE