PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Kathorine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED Apr 15, 1999 8:00 am Secretary of State 04-15-1999 90018 037 ***150.00

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| ANCHOR ENTERPRISES OF | YULEE, INC. | | | | Ì | | | | |
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| Principal Place of Business | Mailin | g Address | | | | (10 [C101 [1] BENY (E | I((Br ill Brill II | | 00114 (BI) 1201 |
| 493 U.S. HIGHWAY 17 NORTH, STE. 2 | • | 3X 1190 | | | | | | | |
| YULEE FL 32041-1180 YULEE FL 32041-1180 | | | | | DO NOT WRITE IN THIS SPACE | | | | |
| | | | | | 3. Date Incorpo | orated or Qualifed | *E ## 11110 | <u> </u> | |
| | | | | | 09/01/199 | 18 | | - | _ |
| 2. Principal Place of Business | <u> </u> | ailing Address | | | 4, FEI Number | 25710 | 750 | | oplied For ot Applicable |
| Suite, Apt. #, etc. | 28) Su | ite, Apt. #, etc. | | | | | | | Additional |
| 35,10,756. 4, 010. | 27 | | | | 5, Certifcate of | Status Desired | -0 | Fee R | equired |
| City & State | <u>—</u> | ty & State | | | | npaign Financing | C) | | May Ø∌ |
| Zip Country | | | Country | , - | Trust Fund (| Contribution tion owes the curr | ent year into | | to Fees |
| 25 | 29 | _ | 30 | | Personal Pro | operty Tax. | | []Yes | □No |
| 9. Name and Address o | f Current Registere | ed Agent | β1 | Name | 10. Name and | Address of New F | Registered / | Agent | |
| TURNER, S. JOAN | | | L_ | <u> </u> | | | | | |
| 2724 PAGES DAIRY ROAD | | | 82 | Street A | Adcress (P.O. Box Num | ber is Not Accepta | able) | | |
| YULEE FL 32097 | | • | 83 | | | | | | |
| | | | 84 | City | | | | 85 Zip | Code |
| | | | | | | | | | |
| | 607 0502 and 607 1 | IEO Florido Statutos | e the above | ' ' | convertion submits this | statement for the | FL numose of | changing its | registe ed |
| 11. Pursuant to the provisions of Sections office or registered agent, or both, in the | 607.0502 and 607.1 he State of Florida. S | 1508, Florida Statutes Such change was aut | s, the above | ' ' | conporation submits this ration's board of direct | statement for the | | changing its | s registe ed egistered |
| Pursuant to the provisions of Sections office or registered agent, or both, in the agent, i am familiar with, and accept the section of | 607.0502 and 607.1 he State of Florida. S he obligations of, Se | 1508, Florida Statutet Such change was aut ction 607.0505, Florid | s, the above thorized by da Statutes | ' ' | conporation submits this ration's board of directors | statement for the | | changing its | s registe. ed egistered |
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| SIGNATURE Signature, typed or printed name of reg 12. OFFIC | | licable (NOTE: F | Tagistered Aper | e-named of the corpo | quin-d when reinstelling) ADDITIONS/(| statement for the ors. I hereby accept the ors. I hereby accept the orself th | purpose of of the appoin | | |
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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 eath; 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, with all other like empowered.

SIGNATURE: