

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

FILED

May 13 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S10311** (6)  
1. Corporation Name  
**SLATON ENTERPRISES, INC.**



Principal Place of Business <b>4184 SO THIRD ST STE 7 JACKSONVILLE BEACH FL 32250 US</b>		Mailing Address <b>% 1920 SAN MARCO BLVD. JACKSONVILLE FL 32207</b>	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.	
22 City & State		27 City & State	
23 Zip Country		28 Zip Country	
24		29	
25		30	
3. Date Incorporated or Qualified <b>11/01/1990</b>			
3a. Date of Last Report <b>04/25/1996</b>			
4. FLE Number <b>38-2956828</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
9. Name and Address of Current Registered Agent <b>KATTMAN, JOHN F. 1920 SAN MARCO BLVD. JACKSONVILLE FL 32207</b>			
10. Name and Address of New Registered Agent			
81 Name			
82 Street Address (P.O. Box Number is Not Acceptable)			
83			
84 City			
85 Zip Code <b>FL</b>			

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>DP</b>	11 TITLE	<b>V</b>
NAME	<b>SLATON, CHARLES R.</b>	12 NAME	<b>BONNY R. HOZA</b>
STREET ADDRESS	<b>9938 DEERCREEK CLUB RD</b>	13 STREET ADDRESS	<b>169 SEA ISLAND DRIVE</b>
CITY-ST-ZIP	<b>JACKSONVILLE FL</b>	14 CITY-ST-ZIP	<b>PONTE VEDRA BEACH, FL 32082</b>
TITLE	<b>DST</b>	21 TITLE	
NAME	<b>SLATON, SHARA GAYLE</b>	22 NAME	
STREET ADDRESS	<b>9938 DEERCREEK CLUB RD</b>	23 STREET ADDRESS	
CITY-ST-ZIP	<b>JACKSONVILLE FL</b>	24 CITY-ST-ZIP	
TITLE		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do 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 changed, or on an attachment with an address.

SIGNATURE: CHARLES R. SLATON *Charles R. Slaton* 3-15-7 2472201

CR2E034 (9/96)