

FILED

Apr 21 1998 8:00am
Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # S18905 (7)					
1. Corporation Name THOMAS C. DEARING, P.A.					
Principal Place of Business 50 N. Laura Street Suite 2800 Jacksonville, FL 32202			Mailing Address 50 N. Laura Street Suite 2800 Jacksonville, FL 32202		
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business 21 Suite, Apt. #, etc.			2a. Mailing Address 25 Suite, Apt. #, etc.		
22 City & State			27 City & State		
23 Zip			28 Zip		
24 Country			29 Country		
3. Date Incorporated or Qualified 12/10/1990			4. FEI Number 59-3043562		
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees		
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No			8. Name and Address of Current Registered Agent Dearing, Thomas C. 50 N. Laura Street, Suite 2800 Jacksonville, FL 32202		
9. Name and Address of New Registered Agent			10. Name and Address of New Registered Agent		
11. Pursuant to the provisions of Sections 607.0502 and 607.1604, 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.			12. SIGNATURE Signature, typed or printed name of registered agent (omit title if applicable) (NOTE: Registered Agent signature required when resigning) DATE		
13. OFFICERS AND DIRECTORS			14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
13.1 TITLE DPST ☐ DELETE 13.2 NAME Dearing, Thomas C. 13.3 STREET ADDRESS 50 N. Laura Street, Suite 2800 13.4 CITY-STATE-ZIP Jacksonville, FL 32202			14.1 TITLE ☐ Change ☐ Addition 14.2 NAME 14.3 STREET ADDRESS 14.4 CITY-STATE-ZIP		
13.5 TITLE ☐ DELETE 13.6 NAME 13.7 STREET ADDRESS 13.8 CITY-STATE-ZIP			14.5 TITLE ☐ Change ☐ Addition 14.6 NAME 14.7 STREET ADDRESS 14.8 CITY-STATE-ZIP		
13.9 TITLE ☐ DELETE 13.10 NAME 13.11 STREET ADDRESS 13.12 CITY-STATE-ZIP			14.9 TITLE ☐ Change ☐ Addition 14.10 NAME 14.11 STREET ADDRESS 14.12 CITY-STATE-ZIP		
13.13 TITLE ☐ DELETE 13.14 NAME 13.15 STREET ADDRESS 13.16 CITY-STATE-ZIP			14.13 TITLE ☐ Change ☐ Addition 14.14 NAME 14.15 STREET ADDRESS 14.16 CITY-STATE-ZIP		
13.17 TITLE ☐ DELETE 13.18 NAME 13.19 STREET ADDRESS 13.20 CITY-STATE-ZIP			14.17 TITLE ☐ Change ☐ Addition 14.18 NAME 14.19 STREET ADDRESS 14.20 CITY-STATE-ZIP		
13.21 TITLE ☐ DELETE 13.22 NAME 13.23 STREET ADDRESS 13.24 CITY-STATE-ZIP			14.21 TITLE ☐ Change ☐ Addition 14.22 NAME 14.23 STREET ADDRESS 14.24 CITY-STATE-ZIP		
13.25 TITLE ☐ DELETE 13.26 NAME 13.27 STREET ADDRESS 13.28 CITY-STATE-ZIP			14.25 TITLE ☐ Change ☐ Addition 14.26 NAME 14.27 STREET ADDRESS 14.28 CITY-STATE-ZIP		
13.29 TITLE ☐ DELETE 13.30 NAME 13.31 STREET ADDRESS 13.32 CITY-STATE-ZIP			14.29 TITLE ☐ Change ☐ Addition 14.30 NAME 14.31 STREET ADDRESS 14.32 CITY-STATE-ZIP		
13.33 TITLE ☐ DELETE 13.34 NAME 13.35 STREET ADDRESS 13.36 CITY-STATE-ZIP			14.33 TITLE ☐ Change ☐ Addition 14.34 NAME 14.35 STREET ADDRESS 14.36 CITY-STATE-ZIP		
13.37 TITLE ☐ DELETE 13.38 NAME 13.39 STREET ADDRESS 13.40 CITY-STATE-ZIP			14.37 TITLE ☐ Change ☐ Addition 14.38 NAME 14.39 STREET ADDRESS 14.40 CITY-STATE-ZIP		
13.41 TITLE ☐ DELETE 13.42 NAME 13.43 STREET ADDRESS 13.44 CITY-STATE-ZIP			14.41 TITLE ☐ Change ☐ Addition 14.42 NAME 14.43 STREET ADDRESS 14.44 CITY-STATE-ZIP		
13.45 TITLE ☐ DELETE 13.46 NAME 13.47 STREET ADDRESS 13.48 CITY-STATE-ZIP			14.45 TITLE ☐ Change ☐ Addition 14.46 NAME 14.47 STREET ADDRESS 14.48 CITY-STATE-ZIP		
13.49 TITLE ☐ DELETE 13.50 NAME 13.51 STREET ADDRESS 13.52 CITY-STATE-ZIP			14.49 TITLE ☐ Change ☐ Addition 14.50 NAME 14.51 STREET ADDRESS 14.52 CITY-STATE-ZIP		
13.53 TITLE ☐ DELETE 13.54 NAME 13.55 STREET ADDRESS 13.56 CITY-STATE-ZIP			14.53 TITLE ☐ Change ☐ Addition 14.54 NAME 14.55 STREET ADDRESS 14.56 CITY-STATE-ZIP		
13.57 TITLE ☐ DELETE 13.58 NAME 13.59 STREET ADDRESS 13.60 CITY-STATE-ZIP			14.57 TITLE ☐ Change ☐ Addition 14.58 NAME 14.59 STREET ADDRESS 14.60 CITY-STATE-ZIP		
13.61 TITLE ☐ DELETE 13.62 NAME 13.63 STREET ADDRESS 13.64 CITY-STATE-ZIP			14.61 TITLE ☐ Change ☐ Addition 14.62 NAME 14.63 STREET ADDRESS 14.64 CITY-STATE-ZIP		
13.65 TITLE ☐ DELETE 13.66 NAME 13.67 STREET ADDRESS 13.68 CITY-STATE-ZIP			14.65 TITLE ☐ Change ☐ Addition 14.66 NAME 14.67 STREET ADDRESS 14.68 CITY-STATE-ZIP		
13.69 TITLE ☐ DELETE 13.70 NAME 13.71 STREET ADDRESS 13.72 CITY-STATE-ZIP			14.69 TITLE ☐ Change ☐ Addition 14.70 NAME 14.71 STREET ADDRESS 14.72 CITY-STATE-ZIP		
13.73 TITLE ☐ DELETE 13.74 NAME 13.75 STREET ADDRESS 13.76 CITY-STATE-ZIP			14.73 TITLE ☐ Change ☐ Addition 14.74 NAME 14.75 STREET ADDRESS 14.76 CITY-STATE-ZIP		
13.77 TITLE ☐ DELETE 13.78 NAME 13.79 STREET ADDRESS 13.80 CITY-STATE-ZIP			14.77 TITLE ☐ Change ☐ Addition 14.78 NAME 14.79 STREET ADDRESS 14.80 CITY-STATE-ZIP		
13.81 TITLE ☐ DELETE 13.82 NAME 13.83 STREET ADDRESS 13.84 CITY-STATE-ZIP			14.81 TITLE ☐ Change ☐ Addition 14.82 NAME 14.83 STREET ADDRESS 14.84 CITY-STATE-ZIP		
13.85 TITLE ☐ DELETE 13.86 NAME 13.87 STREET ADDRESS 13.88 CITY-STATE-ZIP			14.85 TITLE ☐ Change ☐ Addition 14.86 NAME 14.87 STREET ADDRESS 14.88 CITY-STATE-ZIP		
13.89 TITLE ☐ DELETE 13.90 NAME 13.91 STREET ADDRESS 13.92 CITY-STATE-ZIP			14.89 TITLE ☐ Change ☐ Addition 14.90 NAME 14.91 STREET ADDRESS 14.92 CITY-STATE-ZIP		
13.93 TITLE ☐ DELETE 13.94 NAME 13.95 STREET ADDRESS 13.96 CITY-STATE-ZIP			14.93 TITLE ☐ Change ☐ Addition 14.94 NAME 14.95 STREET ADDRESS 14.96 CITY-STATE-ZIP		
13.97 TITLE ☐ DELETE 13.98 NAME 13.99 STREET ADDRESS 13.100 CITY-STATE-ZIP			14.97 TITLE ☐ Change ☐ Addition 14.98 NAME 14.99 STREET ADDRESS 15.00 CITY-STATE-ZIP		
15. 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 changed, or on an attachment with an address.					
SIGNATURE: Thomas C. Dearing 4/13/98 (904) 354-8000					

CR2E034 (10/97)