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 # 1. Corporation Name

S30077

(9)

FLORIDA MSI, INC.

FILED May 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				- I ADDRÁÐJUR FORD FERET DORFA ÐORFA TUÐUR AÐRÐA UFÐ	149 BIBAN DIDIH BADIH BADIN DIDIK 1881	
3521 FLORIDA AVE 3521 FLORIDA AVENUE						
PANAMA CIT		PANAMA CITY FL 32405		DO NOT INDITE IN I	DUO ODACE	
US		US			DO NOT WRITE IN T	HIS SPACE
					3. Date Incorporated or Qualified	
9 Principal P	lace of Business	2s. Mailing Address			02/06/1991 4. FEI Number	
	ace of Business	 				Applied For
Suite, Apt.	# etc	Suite, Apt. #, etc.			59-3049882	Not Applicable 88.75 Additional
22	m, 610.	27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing		
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip			Cour	itry	8. This corporation owes or has paid th	
24	25	29	30	_	Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent			1		10. Name and Address of New Registe	ered Agent
PR	ATHER, JOEL G.			81 Name		
3521 FLORIDA AVENUE				82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	NTE A		ľ	Sileet Add	ress (1.0. Dox (quinter is 140) Acceptable)	
PA	NAMA CITY FL 32405		[7	83		****
			<u> </u>	B4 City		85 Zip Code
			[City		FL 85 Zip Code
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 fighiliar with, and accept hig obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE LOOL M. / MITTER JOSE G. PRATHER PRETIDENT 4/27/98						
Pyricide Cyped or printed name of registered agent and title if applicable (NOTE: Registored Agent						ΤE
12.	/ <u> </u>		13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE //	OP .	☐ DELETE	1.1 717	Æ		Change Addition
NAME V	PRATHER, JOEL G.		1.2 NAN	AE .		
STREET ADDRESS	3521 FLORIDA AVE		1.3 STR	EET ADORESS		İ
CITY-ST-ZIP	PANAMA CITY FL	T pri ere	_	Y-ST-ZIP		
TITLE	Ab	DELETE	2.1 TITU			☐ Change ☐ Addition
NAME	PRATHER, ELIZABETH K		2.2 NAM			1
STREET ADDRESS	3521 FLORIDA AVENUE			EET ADDRESS		
CITY-ST-ZIP	PANAMA CITY FL	DELETE		Y-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	Change Addition
TITLE	S DOATHED ELIZABETH V	נ_ן טנונונ	3.1 TITL			☐ Change ☐ Addition
NAME	PRATHER, ELIZABETH K 8521 FLORIDA AVE		3.2 NAM	-		
STREET ADDRESS				EET ADDRESS		1
CITY-ST-ZIP TITLE	PANAMA CITY FL	DELETE	3.4. CIT 4.1 TITL	Y-ST-7IP		Change Addition
	Prather, Elizabeth K		4.1 IIIL 4.2 NAI			Ci change Ci radillott
NAME Street address	3521 FLORIDA AVE.			ME EET ADDRESS		
1	PANAMA CITY FL			ľ		
CITY-ST-ZIP TITLE	TRANSIC OFFI TE	DELETE	51 TITL	r-ST-ZIP		Change Addition
NAME			5.2 NAM			Em outside Em tracelles
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP				r-St-Zip		
TITLE		☐ DELETE	61 TITL			Change Addition
NAME			6.2 NAN			
STREET ADDRESS						
j j			6.3 STREET ADDRESS 6.4 City - St - Zip			
CITY-ST-ZIP	artily that the information supplied y	it this Class days and a self-			Section 110 07/3Vi) Florida Statutos I furth	

I nereby 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 informatic 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.