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 #

(6)

RICHARD L. WHITE & CO., INC.

Principal Place of Business

Mailing Address

FILED May 06 1998 8:00am Secretary of State



2414 MAHAN DRIVE TALLAHASSEE FL 32308		P.O. BOX 3761 TALLAHASSEE FL 32315-3761			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/20/1991			
2. Principal P	tace of Business	2a. Mailing Address	Mailing Address		4. FEI Number		Applied For	
21		26			59-3058 169		Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	Certificate of Status Desired See Required Fee Required		
City & State	8	Cily & State			6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees	
Zip 24	Country 25	Z ₁ p	Country 30	1	This corporation owes or has paid the Personal Property Tax due June 30.	current year t	ntangible	
	9, Name and Address of Curren	t Registered Agent			10. Name and Address of New Register	ed Agent		
W	HITE, RICHARD L		81	Name				
35	13 BANKHEAD RD. LLAHASSEE FL 32308		82 Str		dress (P.O. Box Number is Not Acceptable)			
ļ			83					
			84	City		85 Zi	o Code	
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607.050: egistered agent, or both, in the State im familiar with, and accept the obligations of the obligation of the state of the	ations of, Section 607.0505, I	Florida Statute	S.	proration submits this statement for the purpos ation's board of directors. I hereby accept the		its registered as registered	
12.	OFFICERS AND		13.	eni signaturo req	paired when reinstating) ADDITIONS/CHANGES TO OFFICERS A		1PS IN 12	
TITLE	P	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OTT IDENS	Change		
NAME	WHITE, RICHARD L		1.2 NAME					
STREET ADDRESS	3513 BANKHEAD RD.			ADDRESS				
CITY-ST-ZIP	TALLAHASSEE FL 32308		1.4 CITY-5					
TITLE		☐ DELETE	21 TITLE			Change	Addition	
NAME			2.2 NAME	[
STREET ADDRESS			2.3 STREET	ADDRESS				
CITY+ST-ZIP			2.4 CITY -	ST- ZIP				
TITLE		DELETE	3.1 TITLE			☐ Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			3.4. CITY -	S1-ZIP				
TITLE		☐ DELETE	4.1 TITLE			Change	Addition	
NAME			4. 2 NAME	ł				
STREET ADDRESS			4 3 STREET					
CITY-ST-ZIP		T DELETE	4.4 CITY-S	ST-ZIP		Change	Addition	
TITLE		DELETE	51 TITLE			□ cuange	ACCURACY	
NAME CYNCET ADDRESS			5.2 NAME	*ODDECO		•	ポン	
STREET ADDRESS			5.3 STREET	1			7.6	
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-5 6.1 TITLE	11-ZIP	- 000002513:	1 Channe	Addition	
NAME		().c.c.(E	6.2 NAME	,		040	רבי אינייטאליניי	
STREET ADDRESS			6.3 STREET	ADDRESS	***150.00			
DITY-ST-ZIP			6.4 DITY-5					
WILL WI 64			■ U.5 UHLL * C	. 611				

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 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.