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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

S39229

(7)

ADHRAUD INC

FILED Jan 26 1998 8:00am Secretary of State

	C. ADUMINI, INC.								
Principal Place of Business Mailing Address						\$:0001019 190 11110 18110 11910 11910 1811 83017 01011 01011 01811 01811 01811 11011			
#	M50 BELLE RIVE BLVD. 106 ACKSONVILLE FL 32256	10150 BELLE RIVE BLVD. #106 JACKSONVILLE FL 32256				DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified				
						03/20/1991			
2.	Principal Place of Business	2a. Mailing Address			-	4. FEI Number Applied For			
21		25				59-3060646 Not Applicable			
22	Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired 58.75 Additional Fee Required			
23	City & State	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
24	Zip Country 25	Zip 29	30 Co.	intry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes No			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
	HUNT, FRANCES L					,			
10150 BELLE RIVE BLVD. APT. #106					Street Addres	ess (P.O. Box Number is Not Acceptable)			

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.

City

SIGNATURE						
12.	Signature, typed or printed name of registered agent and title if applic		legistered Agent eignatur 13.	e required when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	S IN 12
	OFFICERS AND DIRECTOR	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICE	Change	Addition
TITLE	F LIGHT DICHADD E				Onalge	TT Voquoii
NAME	HUNT, RICHARD E		1.2 NAME			
STREET ADDRESS	10150 BELLE RIVE BLVD. APT. #106		1.3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32256		1.4 CITY - ST - ZIP			
TITLE	VP1	DELETE	2.1 TITLE	VPI	Change Change	Addition
NAME	ROYAL, R W		2.2 NAME	RayAL, R.W.		
STREET ADDRESS	4560 HUDNAL ROAD		2.3 STREET ADDRESS	10912 BARKSLING LN		
CITY-ST-ZIP	Jacksonville FL 32207		2. 4 CITY - ST - ZIP	Royal, R.W. 10912 BERKSLING LA JAY. FLA. 3 2225		
TITLE	VP2	DELETE	3.1 TITLE		☐ Change	☐ Addition
NAME	Bailey, John F		3.2 NAME			
STREET ADDRESS	1956 JAMMES RD. STE. 16		3.3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32210		3.4. CITY~ST-ZIP			
TITLE	D	DELETE	4.1 TITLE		☐ Change	Addition
NAME	CURRIE, CHARLIE Y		4, 2 NAME			
STREET ADDRESS	3792 DARNALL PL		4.3 STREET ADDRESS			
CITY-ST-ZIP	Jacksonville FL 32217		4.4 CITY-ST-ZIP			
TITLE	ST	DELETE	5.1 TITLE		☐ Change	Addition
NAME	MILLER, RICHARD E	•	5.2 NAME	TREAL		
STREET ADDRESS	3437 SARAH SPAULDING CT		5.3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32223		5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	□ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			

14. Thereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Zip Code

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