

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

FILED  
Mar 23 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S40059** (5)  
1. Corporation Name  
**STERLING PARTNERS, INC.**

Principal Place of Business <b>408 W. UNIVERSITY AVE. STE 601 GAINESVILLE FL 32601 US</b>	Mailing Address <b>408 W. UNIVERSITY AVE. STE 601 GAINESVILLE FL 32601 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>2103 NW 23<sup>rd</sup> TERRACE</b> Suite, Apt. #, etc. 22 City & State 23 <b>GAINESVILLE FL</b> Zip 24 <b>32605-3837</b>		2a. Mailing Address 25 <b>P.O. Box 13422</b> Suite, Apt. #, etc. 27 City & State 28 <b>GAINESVILLE, FL</b> Zip 29 <b>32604-1422</b>		3. Date Incorporated or Qualified <b>03/21/1991</b>	
Country 25 <b>FLORIDA US</b>		Country 29 <b>US</b>		4. FEI Number <b>59-3063419</b> Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		10. Name and Address of New Registered Agent		\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent <b>BRASHEAR, BRUCE 920 N.W. 8TH AVENUE SUITE A GAINESVILLE FL 32601</b>		81 Name		85 Zip Code	
		82 Street Address (P.O. Box Number is Not Acceptable)			
		83			
		84 City		<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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RADER, DAVID L.	1.2 NAME	
STREET ADDRESS	408 W. UNIVERSITY AVE.	1.3 STREET ADDRESS	7955 LITTLE FOX LANE
CITY-ST-ZIP	GAINESVILLE FL	1.4 CITY-ST-ZIP	JACKSONVILLE FL 32256
TITLE	DP	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, DALE C.	2.2 NAME	
STREET ADDRESS	408 W. UNIVERSITY AVE.	2.3 STREET ADDRESS	2103 NW 23 <sup>rd</sup> TERRACE
CITY-ST-ZIP	GAINESVILLE FL	2.4 CITY-ST-ZIP	GAINESVILLE FL 32605-3837
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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:



DALE C. SMITH

3-19-98

352-371-9500

CR2E034 (10/97)