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FILED
Mar 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S51470 (0)

1. Corporation Name
FLORIDA VECTOR SERVICES, INC.



Principal Place of Business
4724 NW 57TH DRIVE
GAINESVILLE FL 32606-1800
US

Mailing Address
4724 NW 57TH DRIVE
GAINESVILLE FL 32606-1800
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/08/1991

4. FEI Number
59-3077262

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business
21 2770 NE Pinecrest Lakes Blvd
Suite, Apt. #, etc.

22 City & State
23 Jensen Beach FL

24 Zip 34957 25 Country US

26 2770 NE Pinecrest Lakes Blvd
Suite, Apt. #, etc.

27 City & State
28 Jensen Beach FL

29 Zip 34957 30 Country US

9. Name and Address of Current Registered Agent

JONES, O.M., JR.
4724 NW 57TH DRIVE
GAINESVILLE FL 32606

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
2770 NE Pinecrest Lakes Blvd
83
84 City Jensen Beach FL 85 Zip Code 34957

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 of registered agent and name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3-22-98

12. OFFICERS AND DIRECTORS

TITLE PD
NAME JONES, O.M., JR.
STREET ADDRESS 4724 NW 57TH DRIVE
CITY-ST-ZIP GAINESVILLE FL

TITLE TS
NAME JONES, MARYAGNES
STREET ADDRESS 4724 NW 57TH DRIVE
CITY-ST-ZIP GAINESVILLE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2770 NE Pinecrest Lakes Blvd.
Jensen Beach FL 34957

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
2770 NE Pinecrest Lakes Blvd
Jensen Beach FL 34957

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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

3-22-98

CR2E034 (10/97)