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 # S63119

(9)

Principal Place of Business	Mailing Address
110 WEST LEE LANE PALM COAST FL 32137	110 WEST LEE LANE PALM COAST FL 32137

FILED Apr 28 1998 8:00am Secretary of State

NEIL, TANTAY, BAKER, SCRUGGS, AND WINCHELL, INC. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/28/1991 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 59-3113431 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country Country Ζiρ This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name LEY H. SMITH 827 N. HIGHLAND AVE. 62 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32803 83 City 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 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) CR2E034 (10/97) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 11 TITLE Change TITLE TANTAY, ROMAN, JR. NAME **1.2 NAME** 110 WEST LEE LANE STREET ADDRESS 1.3 STREET ADDRESS PALM COAST FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE DV Change Addition TITLE 2.1 TITLE BAKER, STEPHEN NAME 2.2 NAME 97 WOODHAVEN DR STREET ADDRESS 2.3 STREET ADDRESS PALM COAST FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE WINCHELL, PETER NAME 3.2 NAME 110 GRANT APT 23E STREET ADDRESS 3.3 STREET ADDRESS MINNEAPOLIS MN CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 THILE SCRUGGS, ANTHONY NAME 4. 2 NAME **4317 LANDMARK DRIVE** STREET ADDRESS 4.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE R 1 TITLE 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 door 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 reports 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 exercise or trusted 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 an an attachment w