## 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 #

S81303

(7)

THE ANTHONY GRANDIO COMPANY

FILED	
Mar 05 1998 8:00ar	n
Secretary of State	

T ARRIGNAT AND HANDS HAND HAND MAINT THE CAMES AND LINES AND FOREST NICHT NAME AND F

Principal Pla	ce of Busines	s	М	ailing Address					
B282 WESTERN WAY CIR #1233 JACKSONVILLE FL 32256 B282 WESTERN WAY CIR #1233 JACKSONVILLE FL 32256 JACKSONVILLE FL 32256							DO NOT WRITE IN THIS SPACE		
U\$				US				3. Date Incorporated or Qualified 09/19/1991	
2. Principal	Place of Busin	ness	28.	Mailing Address				4. FEI Number Applied For	
21			26					<b>59-3083893</b> Not Applicable	
Suite, Apt. #, etc. 27							5. Certificate of Status Desired See Required Fee Required		
City & Sta	ite _		28	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip		Country		Zip	Co	untry	'	8. This corporation owes or has paid the current year intangible	
24		25	29	· · · · · · · · · · · · · · · · · · ·	30			Personal Property Tax due June 30. Yes No	
		and Address of Cu	rrent Regis	tered Agent		10. Name and Address of New Registered Agent			
	RTRACHTE					81	Name		
13686 BROMLEY POINT DR JACKSONVILLE FL 32225					82	Street Add	idress (P.O. Box Number is Not Acceptable)		
	-					83			
						84	City	FL 85 Zip Code	
11. Pursuan office or	to the provis	ions of Sections 607.	0502 and 6 tate of Florid	07.1508, Florida S da. Such change	Statutes, the a was authorized Statute States	bovi d by	e-named cor the corpora	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered	
SIGNATURE				_					
40	Signature, typed	or printed name of registere		<del> </del>			per arulangia Ine	Quired when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	7DP	OFFICENS	AND DIREC	DELET	13.	ITLE		Change Addition	
NAME	1 -	CHTER, DAVID A.		LL Detter		NAME			
STREET ADDRESS	40000	BROMLEY POINT	DR				ADDRESS		
CITY-ST-ZIP		ONVILLE FL	₩			CITY-S			
TITLE	ST	V:177.000		☐ D€LET			11-211	☐ Change ☐ Addition	
NAME		CHTER, DAVID A.			I	IAME		<del></del>	
STREET ADDRESS		BROMLEY POINT	DR				ADDRESS		
CITY-ST-ZIP		ONVILLE FL					ST-ZIP	¥ + + + + + + + + + + + + + + + + + + +	
TITLE	1			DELET		ITLE		Change Addition	
NAME					3.21	IAME			
STREET ADDRESS					3.3 9	TREET	ADDRESS	j	
CITY-ST-ZIP					3.4.	CITY-:	ST-ZIP	į	
TITLE	1			DELET				Change Addition	
NAME					4. 2	NAME			
STREET ADDRESS					4.3 9	TREET	ADDRESS		
CITY-ST-ZIP					4.4 (	HTY-S	T- ZIP		
TITLE	<del>-</del>			☐ DELET		ITLE		☐ Change ☐ Addition	
NAME					5.21	AME			
STREET ADDRESS					5.3 \$	TREET	ADDRESS		
CITY-ST-ZIP						ITY - S	T- ZIP		
TITLE				DELETI				☐ Change ☐ Addition	
NAME					6.21	IAME			
STREET ADDRESS					6.3 5	TREET	ADDRESS		
CITY-ST-ZIP						ITY-S			

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 supplied ental 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 exemption or the receipt 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.