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 #

(3)

F	ILED)
18	1998	8:00am
cret	ary of	State
	18	FILED 18 1998 cretary of

CITAU	S COUNTY SERVICE CUR	r.			
Principal Plac	ce of Business	Mailing Address			
LEGAL DIMS 225 WATER	ST.	LEGAL DIVISION 225 WATER ST.			
JACKSONVILLE FL 32202 JACKSONVILLE FL 32202				DO NOT WRITE IN THIS SPACE	
US		US			3. Date Incorporated or Qualified
2 Principal F	Place of Business	2a. Mailing Address			10/10/1991 4. FEI Number Applied For
21	200 or 200 moss	26 26			4. FEI Number Applied For Not Applied For Not Applied For
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			\$9.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & Stat	te	City & State			6. Election Campaign Financing \$5.00 May Be
23		28	,		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cour	ntry	 This corporation owes or has paid the current year lutangible
24	25 g. Name and Address of Curre	29	30		Personal Property Tax due June 30. Yes X No
TLI				B1 Name	10. Name and Address of New Registered Agent
	E PRENTICE HALL CORPORAT 01 HAYS STREET	IUN STSTEM,INU.	1	- Maille	
	VI NATS SINCE! NTE 105		Ī	82 Street Add	ress (P.O. Box Number is Not Acceptable)
	LLAHASSEE FL 32301-4		- -	83	
171	CENTROVER I E VEGV (***		Ĺ		
ı			[4	84 City	FI 85 Zip Code
11. Pursuant office or ragent. I a	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the obtaining a supervision of the status of the sta	gations or, Section 607.0505, F	londa Statu	ites.	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
12.		Gent and the happicable (NO ND DIRECTORS		Agent signature requi	
TITLE	S	DELETE	13.	F	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	MILLER, JERRY M. JR.		1.2 NAN		onongo Adultor
STREET ADDRESS	301 S. COLLEGE ST.			EET ADDRESS	
CITY-ST-ZIP	CHARLOTTE NC			r-ST-ZIP	
TITLE	D	DELETE	2.1 TITL		Change Addition
NAME	HODNETT, BRYON E		2.2 NAM	Œ	
STREET ADDRESS	225 WATER ST.		23 S R	EET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL		2 4 CIT	Y - ST - ZIP	
TITLE	D	☐ DELFTE	3.1 TITL	E	Change Addition
NAME	MITCHELL, JOHN A. III		3.2 NAM	1E	
STREET ADDRESS	225 WATER ST.		3 3 S "Ri	EET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL		34 CIT	Y-ST-ZIP	
TITLE	D	☐ DELETE	4 1 ŤITL	E	Change Addition
NAME	WERTZ, LARRY J.		4. 2 NAM	NE	•
STREET ADDRESS	225 WATER ST.		4 3 S1R	EET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL			-ST-ZIP	
TITLE		☐ DELETE	5.1 TI 'LI		☐ Change ☐ Addition
NAME			5.2 N/M	l l	
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP		DELETE		- ST - ZIP	
TIFLE		☐ DELETE	6 1 TITLE		Change Addition
NAME			6.2 N/,M	ŀ	
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP			6.4 CHY	-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

JA Q. Middle IT JOHN A. MITCHELL II 4/20/98 904/361-3651
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Digital Private # 0000071