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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

S91673

(1)

QUEENS HARBOUR PROPERTIES, INC.

FILED Mar 30 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address			1 (421-414 tip (515) Main 2-(1) (422-2 (1)) 4(41) 5(5)		I	
13361 ATLANTIC BLVD.		13361 ATLANTIC BLVD.						
JACKSONVILLE FL 32225-3129		JACKSONVILLE FL 32225-3129		DO NOT WRITE IN THIS	DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified			
					11/05/1991			
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number	I Ar	oplied For	
21 26		26	B		59-3100210	 	ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					Additional	
22		27	27		5. Certificate of Status Desired	Fee Ro	equired	
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip	Counti	У	8. This corporation owes or has paid the cu			
24 25 29			30 Personal Property Tax due June 30. Yes No			_ No		
9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DODGON THOMAS L. ID 81. Name								
DODSON, THOMAS J., JR.			Ľ	IVALITE				
13361 ATLANTIC BLVD.			8:	Street	Address (P.O. Box Number is Not Acceptable)			
JAL	XSONVILLE FL 32225		8:					
!				1				
			B4	City	FL	85 Zip (Code	
11 Pureuant I	a the provisions of Sections 607.05	02 and 607 1509. Florida Statute	e the sho	(e-namec	d corporation submits this statement for the purpose o		te registered	
office or re	egistered agent, or both, in the Stat	te of Florida. Such change was a	uthorized t	w the cor	poration's board of directors. I hereby accept the app	pointment as	registered	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE								
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	D DIRECTOR	1S IN 12	
TITLE	P	DELETE	1.1 TITLE		VICE PRESIDENT	Change	Addition	
NAME	DODSON, J. THOMAS		1.2 NAME		GREG MORRIS			
STREET ADDRESS	13361 ATLANTIC BLVD		1.3 STREE	T ADDRESS	2325 NUMBERTON RD SHITE 20			
CITY-ST-ZIP	JACKSONVILLE FL				CLEARWATER, FLA 33762			
TITLE	V DELETE		2.1 TITLE			Change	Addition	
NAME	KNIGHT, THOMAS		2.2 NAME					
STREET ADDRESS	13361 ATLANTIC BLVD		2.3 STREE	T ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 CITY - ST - ZIP					
TITLE	DELETE 3.1		3.1 TITLE			Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP					
TITLE	☐ DELE TE		4.1 TITLE			Change	Addition	
NAME			4. 2 NAM					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP		T beiete	4.4 CITY-	ST-ZIP	_			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition	
NAME			5.2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP		DELETE	5.4 CITY-	S1-ZIP		Change	Addition	
TITLE		☐ DETEIE	6.1 TITLE			□ ruan∄s		
NAME			6.2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP	erlify that the information convolind i	with this filing does not qualify to	6.4 CITY-		ed in Section 119 07/3\(ii) Florida Statutes Lituriber of	ertify that the	information	
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.								