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

PROFIT CORPORATION ANNUAL REPORT

1998

DOCUMENT #



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

V04436

FILED May 13 1998 8:00am Secretary of State

11.	

YOUNG	ONE INC	(4)				
Principal Plac	e of Business	Mailing Address		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Manager January Internal Conference of the Confe	ł IMA!
1201 OAKFIELD DRIVE 1201 OAKFIELD DRIVE SUITE 104 SUITE 104 BRANDON FL 33511 BRANDON FL 33511		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualified	
Delegation of O	Heart of D	TA Walley Address			12/19/1991	
	lace of Business	2a. Mailing Address			4. FEI Number Applie	
Sulte, Apt.	# ato	Suite, Apt. #, etc.				plicable
22		27			5. Certificate of Status Desired See Requir	
City & State	e 	City & State			6. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Fe	
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the current year Intangi	ble
24	25	29	30		Personal Property Tax due June 30. 📝 Yes 🗌 No)
	g, Name and Address of Curren	t Registered Agent		. 1	10. Name and Address of New Fiegistered Agent	
í	2 8		8	1 Name		
	me S Kimbrell		8	2 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
	05 Shoreline Dr Su	lite 109	8	3	10.1	
181	mpa, Florida 33605		-	4 City	In Zin Code	
ţ			"	City	FL 85 Zip Code	'
office or r	to the provisions of Sections 607.050; egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was	: authorized I	by the corpor	orporation submits this statement for the purpose of changing its regration's board of directors. I hereby accept the appointment as region	gistered stered
SIGNATURE						
·	Signature, typed or printed harne of registered ager			gent signature req	quired when reinstating) DATE	
12.	OFFICERS AND	DELETE DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	
NAME					Change	J Addition
STREET ADDRESS	YOUNG, WILLIAM H. 502 LISA LANE		1.2 NAM	_		
	BRANDON FL 33511			ET ADDRESS		
CHTY-ST-ZIP TITLE	DEPARTMENT & 33311	DELETE	1.4 City-		Change	Addition
NAME		La occerc	2.2 NAM		Chunge L.) Addition
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			2.4 CITY			ŀ
TITLE		DELETE	3.1 TITLE		Change	Addition
NAME		_	3.2 NAMI	i i		,
STREET ADDRESS				ET ADDRESS		i
CITY-ST-ZIP			3.4. CITY			ľ
TITLE		DELETE	4 1 TITLE		☐ Change ☐	Addition
NAME			4. 2 NAM	E.	- · ·	
STREET ADDRESS			4 3 STREE	ET ADDRESS		
CITY-ST-ZIP			4 4 CITY	-ST-ZIP		
TITLE		☐ DELFTE	51 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			5.4 CITY			
TITLE		DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME		100002525 26 1	,
STREET ADDRESS				ET ADDRESS	100002525 26.1 -05/15/9801049-001	9
CITY-ST-ZIP			6.4 CITY		***150.00	/

6.4 CITY - S1 - 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 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 on an attachery with an address.