-11	F	ทบพา	FILING	FFF	AFTFR	MAY	12T	21	\$550	ΩN
ΓIL		MUW.	TILINU	LCE	ALICU	IMMI	191	10	JUUU.	υU

PROFIT CORPORATION **ANNUAL REPORT** 1998 DOCUMENT #

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

V31981

(6)

FLORIDA OUTLETS, INC.

Apr 27 1998 8:00am Secretary of State

|--|--|--|

904-273. 2676

FILED

Principal Placi	e or business	Malling Address				1			
10789-05 BE/ JACKSONVIL			JACKSONVILLE BEACH FL 32240						
		US				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						04/28/1992			
2. Principal P	lace of Business	2a. Mailing Addres	2a. Mailing Address			4. FEI Number Applied Fo)F		
21		26	26			58-1985185 Not Applic	able		
Suite, Apt. #, etc.		Suite, Apt. #, et	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additions	al		
22		27				Fee Required			
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			
Zip Country		Zip			,	8. This corporation owes or has paid the current year Intangible			
24	25	29	→ ·			Personal Property Tax due June 30. Yes No			
· .		f Current Registered Agent		Ţ		10. Name and Address of New Registered Agent			
EI	LIS, ROBERT L.			81	Name				
	769-05 BEACH BLVD.			L					
				82	Street A	Address (P.O. Box Number is Not Acceptable)			
JA	CKSONVILLE FL 32216			83	 				
				63					
				84	City	85 Zip Code			
					1 1	FL 1			
11. Pursuant	to the provisions of Sections	607.0502 and 607.1508, Florida	Statutes, the a	bov	e-named c	corporation submits this statement for the purpose of changing its register oration's board of directors. I hereby accept the appointment as register	red		
Office or r	egistered agent, or both, in t m familiar with, and accept t	the State of Florida. Such change he obligations of Section 607.05	was authorize 05. Florida Sta	ed by	y the corpo	oration's board of directors, it hereby accept the appointment as registers	90		
	in taniliai with, and accept to	ne obligations of, Section 607:00	os, riorida sia	atut o	3.				
SIGNATURE	Signature, typed or printed name of reg	historiad agent and title if applicable	(NOTE Register)	ed Age	ent signalure (required when reinstating) DATE	—		
12.		ERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	☐ DELE	TE 1.11	TITLE		_ Change Adv	dition		
NAME	ELLIS, ROBERT L.			NAME		D Change 2 Au			
	10769-05 BEACH BLV	n				GLEATON, JAMES III			
STREET ADDRESS	JACKSONVILLE FL				T ADDRESS	JACKSONVILLEE ACH BLYD216			
CITY-ST-ZIP		There			ST-ZIP	JACKSONVILLE FL 32216	dition		
TITLE	D	DELE		TITLE			anion		
NAME	ELUS, SUE F.		2.2	VAME					
STREET ADDRESS	10769 BEACH BLVD.		2.3 5	STAEET	T ADDRESS				
CITY-ST-ZIP	Jacksonville fl		2.4	CITY -	ST-ZIP				
TITLE		☐ DELE	TE 3.17	TITLE		☐ Change ☐ Add	dition		
NAME			3.21	NAME					
STREET ADDRESS			I		T ADDRESS				
CITY-ST-ZIP					ST-ZIP				
TITLE		☐ DELE		TITLE	21-411	☐ Change ☐ Adx	dition		
				NAME	[
NAME					1				
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP					ST-ZIP		411100		
TITLE		☐ DELE	5.1 T	TITLE		☐ Change ☐ Add	THOU		
NAME			5.2)	NAME	į				
STREET ADDRESS			5.3 \$	STREET	T ADDRESS				
CITY-ST-ZIP			5.4 (CITY-S	ST-ZIP				
TITLE		DELE		TITLE		Change Add	dition		
NAME			6.21	NAME					
STREET ADDRESS					F ADDRESS				
į			■ ·						
City-St-ZIP			■ 6.40	CITY • S	ST-ZIP				

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.