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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # V42066

(3)

Mailing Address

M & E OF NORTHWEST FLORIDA, INC.

FILED
Apr 23 1998 8:00am
Secretary of State



601 EAST BURGESS ROAD SUITE D-3 PENSACOLA FL 32504 US				S P	601 EAST BURGESS ROAD SUITE D-3 PENSACOLA FL 32504 US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/08/1992					
2. 21	2. Principal Place of Business				28. Mailing Address						FEI Number 59-3128090			Applied For Not Applicable	
22	Suite, Apt. #, etc.				Suite, Apt. #, etc.				·	5.	Certificate of Status Desired			5 Additional Required	
23	City & State				Cily & State						Election Campaign Financing Trust Fund Contribution			00 May Be ed to Fees	
24	Zip		Country 25	29					This corporation owes or has paid the Personal Property Tax due June 30.			30. 2	Yes 🔲 No		
	- ALINA		and Address of Curr	ent Hegis	tered Agent	81			10.	Name and Address of New R	gistered A	gent			
		AYER, ED					81	81 Name							
601 EAST BURGESS ROAD Apartment D-3 Pensacola FL 32504								S	Street Address (P.O. Box Number is Not Acceptable)						
							63							•	
							84	C	City			FL	85 Z	ıp Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.															
SI	GNATURE _	onsture Ivood	or printed name of registered.	acent and the	if annheable	(NOTE Beat	stered Age	ını s	gnature required	d when r	reinstation)	DATE			
12			OFFICERS A				13.				DDITIONS/CHANGES TO OFFI	CERS AND	DIRECT	ORS IN 12	
TIT	LE I	D			DELE	TE 1	I.1 TITLE						Chang	e Addition	
NA.	ME	PENSACOLA FL				1	I.2 NAME								
STE	EET ADDRESS							ADI	DRESS						
CIT	Y-ST-ZIP						.4 CITY-S	-ST-ZIP							
TIT	E	סוע			☐ DELE	TE 2	1 TITLE					Ü	Chang	e 🔲 Addition	
NA	WE .	D UNAYER, EDNA			2			ET ADDRESS							
STE	STREET ADDRESS CITY-ST-ZIP 601 EAST BURGESS ROAD, AF PENSACOLA FL			, aparti											
CIT								2. 4 CITY - ST - ZIP							
TIT	LE				☐ DELE	TE 3	.1 TITLE						Chang	e Addition	
NA	ME					3	3.2 NAME							.	
ST	REET ADDRESS					3	3.3 STREET	ADO	DRESS						
CIT	Y-ST-ZIP						3.4. CITY- S	31 - Z	ZIP						
TIT	LE				DELE.	TE 4	I.1 TITLE						Chang	e 🔲 Addition	
NA	ME					4	I. 2 NAME								
STE	REET ADDRESS					4	I.3 STREET	ADC	DRESS						
СIT	Y-ST-ZIP						I.4 CITY - S	T- ZI	TP						
TIT	.E	-			☐ DELE	TE 5	i.1 TITLE						Chang	e 🔲 Addition	
NAI	VIE					. 5	.2 NAME								
STE	IEET ADDRESS					5	i.3 STREET	ADC	DRESS						
CIT	Y-ST-ZIP						4 CITY-S	T- 21	IP .						
TiT	Æ	-			☐ DELE	TE 6	.1 TITLE	_					Chang	e Addition	
NA	AE					6	.2 NAME		}						
STREET ADDRESS					6.3 \$1			ET ADDRESS							
									1						

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 principled, or on an appearance with an address.