


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

FILED

Jan 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **V47582** (4)
1. Corporation Name
CTB ENTERPRISES, INC.



Principal Place of Business 10801 SAN JOSE BLVD. SUITE 213 JACKSONVILLE FL 32257	Mailing Address 10801 SAN JOSE BLVD. SUITE 213 JACKSONVILLE FL 32257
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country		3. Date Incorporated or Qualified 07/01/1992	
4. FEI Number 59-3130764		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent ALLEN, GLENN K. 353 E. FORSYTH STREET JACKSONVILLE FL 32202				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAUGHMAN, CHARLES T.	1.2 NAME	
STREET ADDRESS	193 LINKSIDE CR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	PONTE VEDRA BCH. FL	1.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	193 LINKSIDE CR.	2.2 NAME	
CITY-ST-ZIP	PONTE VEDRA BCH. FL	2.3 STREET ADDRESS	
TITLE	DV <input type="checkbox"/> DELETE	2.4 CITY-ST-ZIP	
NAME	WARE, DONALD S., JR.	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	10801 SAN JOSE BLVD #213	3.2 NAME	
CITY-ST-ZIP	JACKSONVILLE FL	3.3 STREET ADDRESS	
TITLE	DST <input checked="" type="checkbox"/> DELETE	3.4 CITY-ST-ZIP	
NAME	BLOCKER, EILEEN	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	10801 SAN JOSE BLVD #213	4.2 NAME	
CITY-ST-ZIP	JACKSONVILLE FL	4.3 STREET ADDRESS	
TITLE	V <input type="checkbox"/> DELETE	4.4 CITY-ST-ZIP	
NAME	CHAPPELL, KAREN	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	10801 SAN JOSE BLVD.	5.2 NAME	
CITY-ST-ZIP	JACKSONVILLE FL	5.3 STREET ADDRESS	
TITLE	<input type="checkbox"/> DELETE	5.4 CITY-ST-ZIP	
NAME		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		6.2 NAME	
CITY-ST-ZIP		6.3 STREET ADDRESS	
		6.4 CITY-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.

SIGNATURE

CR2E034 (10/97)