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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

FEARNOW AND ASSOCIATES, INC.

**FILED** Apr 27 1998 8:00am Secretary of State



782 DR. M. L. KING BLVD. SEFFNER FL 33584 US		782 DR. M. L. KING BLVD. SEFFNER FL 33584 US			<u>-</u>	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  07/30/1992			
2. Principal P	lace of Business	2a. Mailing Address	}			4. FEI Number 59-3 138038		applied For lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt #, etc.	11			Certificate of Status Desired	\$8.75	Additional	
22 City & State	n	City & State	City & State					Required	
23		28	<del> </del>			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees			
Zip	Country	Zıp	Country			8. This corporation owes or has paid the			
24	25 29 30 30 30 30 30 30 30 30 30 30 30 30 30			Personal Property Tax due June 30.					
					81 Name				
788 DR. M.L. KING BLVD.				82 Street Address (P.O. Box Number is Not Acceptable)					
) SEI		ļ							
				83					
				84 City	у	=	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: Regis				Agent sign	ature required s	when reinstating) DATE			
12.	OFFICERS AND DIRECTORS  DELETE		_	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO Change	RS IN 12	
NAME	FEARNOW, SUSAN E.	□ beteit	1.1 III				Change	Addition	
STREET ADDRESS	2910 BEAGLE PLACE			rreet addre	:ss				
CITY-ST-ZIP	SEFFNER FL			IY-ST-ZIP	~				
TITLE	P	☐ DELETE	2.1 TIT				☐ Change	Addition	
NAME	FEARNOW, KENNETH W		2.2 NA	ME					
STREET ADDRESS	2910 BEAGLE PLACE		2.3 ST	REET ADDRE	SS				
CITY-ST-ZIP	SEFFNER FL 33584	DE PER		TY-ST-ZIP		<u> </u>		1.4495	
TIFLE	☐ DELETE		1	3.1 TITLE			Change	Addition	
NAME			1	3.2 NAME					
STREET ADDRESS			1	3.3 STREET ADORESS					
CITY-ST-ZIP	DELETE			3.4. CITY-ST-ZIP 4.1 TITLE			Change	Addition	
NAME			4. 2 N/						
STREET ADDRESS				REET ADORE	ss				
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TITLE	DELETE.		5.1 TIT	5.1 TITLE			Change	Addition .	
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET ADDRE	ss				
CITY-ST-ZIP		1 britte	_	Y-ST-ZIP			05	paste-	
TITLE		☐ DELETE	6.1 TiT				☐ Change	☐ Addition	
NAME CENTER ADORESO			6.2 NA						
STREET ADORESS				REET ADDRE	38				
14. I hereby o	ertify that the information supplied	with this filing does not qualify fo	r the axe	Y-ST-ZIP mption s	tated in Se	ection 119.07(3)(i), Florida Statutes. I further	certify that th	e 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 eceiver of 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 or an attachment with an address.									