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

PROFIT CORPORATION ANNUAL REPORT 1998



Secretary of State **DIVISION OF CORPORATIONS**

FILED Mar 04 1998 8:00am Secretary of State

1. Corporatio	MENT # V7264 Clark ford-mercury, In	- (-)				
Principal Place of Business Mailing Address					S ESPAIN BROWN BIRDS BIRDS BERNINGE	
3518 EAST STATE ROAD 200		PO BOX 340				
YULEE FL 32097 US		YULEE FL 32097 US		DO NOT WRITE IN T	THIS SDACE	
03		Uð		3. Date Incorporated or Qualified	HIS SPACE	
				10/16/1992		
2. Principal P	lace of Business	2a, Mailing Address		4. FEI Number	Applied For	
21		26		59-3148805	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
27				8. Certificate or Status Desired	Fee Required	
City & State	е	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid th	e current year intangible	
24	25 25 Name and Address of Curre		30	Personal Property Tax due June 30. 10. Name and Address of New Registe	Yes No	
НО	LBROOK, H. LEON	Aistoton viAgitt	81 Name	10. Italiio and Addiess of Item Registe	non Want	
2301 INDÉPENDENT SQUARE ONE INDÉPENDENT DRIVE JACKSONVILLE FL 32202						
			82 Street Address (P.O. Box Number is Not Acceptable)			
			83	83		
					· · · · · · · · · · · · · · · · · · ·	
			84 City		EL 85 Zip Code	
	to the provisions of Sections 607.056 egistered agent, or both, in the State in familiar with, and accept the oblig	02 and 607.1508, Florida Statute e of Florida. Such change was au ations of, Section 607.0505, Flor	s, the above-named uthorized by the corp rida Statutes.	corporation submits this statement for the purpo poration's board of directors. I hereby accept the	se of changing its registered appointment as registered	
SIGNATURE	Signature, typed or profes name of registered ag	and and tille d applicable (NOTE)	Registered Agent signature	required when reinstating)	ATE	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	P	☐ DELETE	1.1 TITLE		Change Addition	
NAME	CLARK, PAUL D.	444.5	1.2 NAME			
STREET ADDRESS	PO BOX 340 NA, 2070 HWY	A1A E	1.3 STREET ADORESS	3518 EAST STATE ROAD 200		
CITY-ST-ZIP	YULEE FL		1.4 CITY-ST-ZIP			
TITLE	ST SIANK FURANCELLA	DELETE	21 TITLE		Change ☐ Addition	
NAME	CLARK, ELIZABETH B		2.2 NAME	2510 5105 65155 5015 000	l	
STREET ADDRESS	PO BOX 340, 2070 HWY A1/	1 E	2.3 STREET ADDRESS	3518 EAST STATE ROAD 200		
CITY-ST-ZIP	YULEE FL		2. 4 CITY-ST-ZIP			
TITLE	CLARK, JAMES	DELETE	3.1 TITLE		Change Addition	
NAME	PO BOX 340, 2070 HWY A1/	A F	3.2 NAME	2510 PACT CTATE DOAD 100		
STREET ADDRESS	YULEE FL	•	3.3 STREET ADDRESS	3518 EAST STATE ROAD 200		
CITY-ST-ZIP TITLE	136616	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition	
NAME					Ticinantia Livoduou	
STREET ADDRESS			4. 2 NAME			
CITY-ST-ZIP			4.3 STREET ADDRESS			
TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS		•	
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
	artifus that the information and all order	table of the Allinois of the second of the Allinois		d in Section 119 07/3Vi). Florida Statutas, Liturals		

quality for the exemption stated in Section 1.307(3)(1), Florida Statules. I further certify that the informatio and accurate and that my signature shall have the same legal effect as finade under oath; that I am an regid to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

JAMES W. CLARK - VP/CFO

904/225-3673