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

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT #

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(0)

EMMER DEVELOPMENT CORP

FILED May 14 1998 8:00am Secretary of State



| Principal Plac | e of Business | Mailing Address | | | 1 (ABITA NEU AIAIA HAIA SAUT IBINI I | imit minit Aibit ainit Asnis Binit asn | 11:10:01 |
|---|--|--------------------------------|--------------------|--|--|--|-------------|
| 2901 S.W. ARCHER ROAD 2801 S.W. ARCHER ROAD | | | AD | | | | |
| GAINESVILLE FL 32608-1025 | | GAINESVILLE FL 32608-1025 | | DO NOT WELL | DO NOT WRITE IN THIS SPACE | | |
| | | | | | 3. Date Incorporated or Qualified | | |
| 1 | | | | | 12/19/1960 | | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | | 4. FEI Number | Applie | d For |
| 21 | NOS S. Bosmos | 26 | | | 59-0934800 | | plicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | \$8.75 Addi | tional | |
| 22 | | 27 | 27 | | 5. Certificate of Status Desired | Fee Requir | ed |
| City & State | | City & State | | 6. Election Campaign Financing | \$5.00 May | y Be | |
| 23 | | 28 | | Trust Fund Contribution | Added to Fe | 9 0 S | |
| Zip | Country Zip | | <u>-</u> | 8. This corporation owes or has paid the current year Intangible | | | |
| 24 | 25 | 29 | 30 | | Personal Property Tax due Jur 10. Name and Address of New R | | |
| | 9. Name and Address of Curre | nt Registered Agent | | 31 Name | 10. Name and Address of New F | egistered Agent | |
| | IMER, PHILIP I | | [| , vaine | | | |
| | D1 S.W. ARCHER RD. | | 62 Street Ad | | Address (P.O. Box Number is Not Accepta | able) | |
| GA. | INESVILLE FL 32608 | | · • | 33 | | | |
| | | | Ĺ | | | | |
| ĺ | | | Ī | 34 City | | FL 85 Zip Cod | e |
| 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 register. | | | | | | | |
| 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 ponted name of registered as | yen) and title diappArable (NC | TE Registered | Agent signature | required whon reinstating) | DATE | |
| 12. | OFFICERS AN | ND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFF | | |
| THILE | VPT | ☐ DELETE | 1.1 TITE | F | S/T/D | K. Change | J Addition |
| NAME | AYOUB, PAUL | | 1.2 NAM | AE . | Ayoub, Paul | | |
| STREET ADDRESS | | | 1.3 STREET ADDRESS | | 2801 SW Archer Road | | |
| CITY-ST-ZIP | GAINESVILLE FL 32608 | T occurs | | 7-ST-ZIP | Gainesville FL | X Change | Addition |
| TITLE | VPD | ☐ DELETE | 2.1 TITO | | V/D | My Cliaride | J MODITION |
| NAME | EMMER, BARBARA L | | 2.2 NAM | | Emmer, Barbara L. | | |
| STREET ADDRESS | 2736 NW 22ND DRIVE | | | EET ADDRESS | 2736 NW 22nd Drive | | |
| CITY-ST-ZIP | GAINESVILLE FL PD | DELETE | | Y - ST - ZIP | Gainesville FL | Change | Addition |
| TITLE | EMMER, PHILIP L | | 3.1 1111 | | | □ outside □ | _ 110010011 |
| NAME PARTEZ ADDOGGO | 2736 NW 78TH STREET | | 3.2 NAI | AE EE1 ADDRESS | | | j |
| STREET ADDRESS | GAINESVILLE FL | | | Y-ST-ZIP | | | l |
| CITY-ST-ZIP TITLE | VSD | DELETE | 4.1 3(1) | | V/D | X Change | Addition |
| NAME | MCGRIFF, LORI E | | 4, 2 NA | - | McGriff, Lori E. | | |
| STREET ADDRESS | 4721 NW 25TH DRIVE | | | EE1 ADDRESS | 4721 NW 25th Drive | | ļ |
| CITY+ST-ZIP | GAINESVILLE FL | | | r-ST-ZIP | Gainesville FL | | l |
| TITLE | D | X DELETE | 5.1 1(1) | | GG_LIEBY_LL | Change | Addition |
| NAME | MOULTON, CLAUDE | | 5.2 NA | ΛE | | | |
| STREET ADDRESS | 2801 SW ARCHER ROAD | | 5.3 \$1F | EET ADDRESS | | | |
| CITY-ST-ZIP | GAINESVILLE FL | | 5.4 CIT | 7-ST-ZIP | | | |
| TITLE | | DELETE | 6.1 TITI | | | Change | Addition |
| NAME | | | 6.2 NAT | AE . | | | ļ |
| STREET ADDRESS | | | 6.3 S1F | EET ADDRESS | | | İ |
| CITY-ST-ZIP | | | 6400 | Y-ST-ZIP | | | |

14. Thereby 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 altrachment with an address.