

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90133 046 ***150.00

DOCUMENT # 242990

1. Corporation Name

EMMER DEVELOPMENT CORP

Principal Place of Business

**2801 S.W. ARCHER ROAD
GAINESVILLE FL 32608-1025**

Mailing Address

**2801 S.W. ARCHER ROAD
GAINESVILLE FL 32608-1025**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/19/1960

4. FEI Number

- 59-0934800

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

**EMMER, PHILIP I
2801 S.W. ARCHER RD.
GAINESVILLE FL 32608**

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

TITLE	STD	☒ DELETE
NAME	AYOUB, PAUL	
STREET ADDRESS	2801 SW ARCHER ROAD	
CITY-ST-ZIP	GAINESVILLE FL 32608	
TITLE	VD	☐ DELETE
NAME	EMMER, BARBARA L	
STREET ADDRESS	2736 NW 22ND DRIVE	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	PD	☐ DELETE
NAME	EMMER, PHILIP L	
STREET ADDRESS	2736 NW 78TH STREET	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	VD	☐ DELETE
NAME	MCGRIFF, LORI E	
STREET ADDRESS	4721 NW 25TH DRIVE	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☐ Change ☒ Addition
1.2 NAME	ROD MUSSELMAN	
1.3 STREET ADDRESS	2801 SW ARCHER ROAD	
1.4 CITY-ST-ZIP	GAINESVILLE FL 32608	
2.1 TITLE	D	☒ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	CD	☒ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	VSD	☒ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS	2801 SW ARCHER ROAD	
4.4 CITY-ST-ZIP	GAINESVILLE FL 32608	
5.1 TITLE	T	☐ Change ☒ Addition
5.2 NAME	KIMBERLY S. NAUMOFF	
5.3 STREET ADDRESS	2801 SW ARCHER ROAD	
5.4 CITY-ST-ZIP	GAINESVILLE, FL 32608	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/99

352-376-2444
Daytime Phone #

CR2E034 (1/98)