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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT	#	537	736
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1. Corporation Name

INDUSTRIAL PARK DEVELOPMENT CORPORATION

•								<b>a</b> i e e i <b>e e e</b>	
Principal Place	e of Business	Mailing Address			_			IUII BIBII BIBII B	
200 E. ROBINSO		200 E. ROBINSON STREET							
SUITE 920	ON STREET	SUITE 920							
ORLANDO FL 3	2801	ORLANDO FL 32801				DO NOT WRIT	E IN THIS	SPACE	
US		US				3. Date Incorporated or Qualifed			1
						06/22/1977		11.	
	lace of Business	2a. Mailing Address				4. FEI Number		·	plied For
21		26			_	59-1784611		\$8.75 A	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	X	Fee Re	
City & State	^	City & State			_	6. Election Campaign Financing		\$5.00	
23	<del>c</del>	28				Trust Fund Contribution		Added to	
Zip Zip	Country	Zip	Cour	itry		8. This corporation owes the curre	ent vear Int	angible	
24	25	29	30	•		Personal Property Tax.		ŬYes	Mo
	9. Name and Address of Current					10. Name and Address of New R	egistered	Agent	
				81	Name				
	KER, EARL M., JR.		ŀ	82	Street Addr	ess (P.O. Box Number is Not Accepta	ble)		
	E. DUVAL ST.							<del> </del>	
JACH	KSONVILLE FL 32202			83					
			ŀ	84	City			85 Zip C	Code
							<u> </u>	. [ ]	
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statute	es, the ab	ove-	named corporation	oration submits this statement for the	purpose of	changing its	registered distered
onice or n agent. 1 ai	egistered agent, or both, in the State of im familiar with, and accept the obligati	ions of, Section 607.0505, Flor	rida Statu	tes.	ne corporatio	ATS board of directors. Thereby accept	t are appoin	inanioni do ro	giotoro
SIGNATURE									
	Signature, typed or printed name of registered agent			Agent s	signature required	d when reinstating)	DATE	ID DIDECTO	DC IN 12
12.	OFFICERS AND	DIRECTORS	13.		signature required	d when reinstating) ADDITIONS/CHANGES TO OF			
12.	OFFICERS AND		13.	LE	signature required			ID DIRECTO	RS IN 12
12. TITLE NAME	OFFICERS AND DVST WEBB, WILLIAM C JR	DIRECTORS	13. 1.1 TITI 1.2 NAI	LE ME					
12. TITLE NAME STREET ADDRESS	DVST WEBB, WILLIAM C JR 1300 NW 167TH ST	DIRECTORS	13. 1.1 TITI 1.2 NAJ 1.3 STF	LE ME REET A	ADDRESS				
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVST WEBB, WILLIAM C JR 1300 NW 167TH ST MIAMI FL 33169	D DIRECTORS	13. 1.1 TITI 1.2 NAI 1.3 STF	LE ME REET A Y-ST-	ADDRESS			☐ Change	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DVST WEBB, WILLIAM C JR 1300 NW 167TH ST MIAMI FL 33169 AS	DIRECTORS	13. 1.1 TITI 1.2 NAF 1.3 STF 1.4 CIT 2.1 TITE	LE ME REET A Y-ST- LE	ADDRESS				Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DVST WEBB, WILLIAM C JR 1300 NW 167TH ST MIAMI FL 33169 AS ENGLEHART, BERTHA	D DIRECTORS	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI	LE ME REET A Y-ST- LE ME	ADDRESS ZIP			☐ Change	Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DVST WEBB, WILLIAM C JR 1300 NW 167TH ST MIAMI FL 33169 AS ENGLEHART, BERTHA 1300 NW 167TH ST	D DIRECTORS	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF	LE ME REET A Y-ST- LE ME REET A	ADDRESS  ADDRESS			☐ Change	Addition
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12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	DVST WEBB, WILLIAM C JR 1300 NW 167TH ST MIAMI FL 33169 AS ENGLEHART, BERTHA 1300 NW 167TH ST MIAMI FL 33169. ASD BARKER, EARL M., JR.	D DIRECTORS  □ DELETE  xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	13. 1.1 TITI 1.2 NAJ 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAJ 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAJ	LE ME REET A Y-ST- LE ME REET A IY-ST- LE	ADDRESS  ADDRESS  ADDRESS  -ZIP		FICERS AN	☐ Change	☐ Addition
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	DVST WEBB, WILLIAM C JR 1300 NW 167TH ST MIAMI FL 33169 AS ENGLEHART, BERTHA 1300 NW 167TH ST MIAMI FL 33169. ASD BARKER, EARL M., JR. 334 E. DUVAL ST.	D DIRECTORS  □ DELETE  xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	13. 1.1 TITI 1.2 NAJ 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAJ 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAJ 3.3 STF	LE ME TY-ST- LE ME TY-ST- LE ME TY-ST- LE ME REET A	ADDRESS ADDRESS -ZIP ADDRESS -ZIP		FICERS AN	☐ Change	☐ Addition
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AND DVST WEBB, WILLIAM C JR 1300 NW 167TH ST MIAMI FL 33169 AS ENGLEHART, BERTHA 1300 NW 167TH ST MIAMI FL 33169. ASD BARKER, EARL M., JR. 334 E. DUVAL ST. JACKSONVILLE FL 32202	D DIRECTORS  □ DELETE  xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	13. 1.1 TITI 1.2 NAJ 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAJ 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAJ	LE ME YY-ST- LE ME YY-ST- LE ME ME MY-ST- LE ME	ADDRESS ADDRESS -ZIP ADDRESS -ZIP		FICERS AN	☐ Change	☐ Addition
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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 supplied ental 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 one an attackment with an address, with all other like empowered.

SIGNATURE:

REQUIREEarl M. Barker, Jr.

(904) 353-0033