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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 541795

Corporation Name

Principal Place of Business	Mailing Address	
7220 E TECHNOLOGY DR MELBOURNE FL 32904	P.O. BOX 1676 MELBOURNE FL 32902	

FILED Mar 31, 1999 8:00 am **Secretary of State**

03-31-1999 90046 031 ***158.75



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 07/28/1977 Applied For 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Not Applicable 59-1753610 26 6921 VICKIE CIRCLE \$8.75 Additional Suite, Apt, #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing П Added to Fees Trust Fund Contribution WEST MELBOUR 28 Zip Country 8. This corporation owes the current year Intangible □No 30 Personal Property Tax. 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 FALLACE, JAMES H Street Address (P.O. Box Number is Not Acceptable) 82 1900 S HICKORY STREET MELBOURNE FL 32901 83 85 Zip Code City 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 requ CR2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change ☐ Addition DELETE 11TITLE TITLE HOWARD, GEORGE A 1.2 NAME NAME 6000 TECHNOLOGY DRIVE 1.3 STREET ADDRESS STREET ADDRESS W MELBOURNE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE 2.2 NAME HOWARD, MICHAEL F NAME STREET ADDRESS 6000 TECHNOLOGY DRIVE 2.3 STREET ADDRESS W MELBOURNE FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition □ Change DELETE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP [] Addition DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 oort is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an tee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this annual repart of supplement officer or director of the Block 12 or Block 13 if

SIGNATURE