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

DOCUMENT # 655564

MARTIN	B. STRINGFELLOW COMPA	ANY			
Principal Place	e of Rusiness	Mailing Address			
•		5401 KIRKMAN RD STE 7	on	•	
5401 KIRKMAN RD STE 790 5401 KIRKMAN RD STE ORLANDO FL 32819 ORLANDO FL 32819		30			
					ITE IN THIS SPACE
				3. Date Incorporated or Qualifed	
	<u> </u>			02/11/1980	
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-1975801	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
22		City 9 State			·····
City & State	e	City & State		6. Election Campaign Financing	□ \$5.00 May Be
23 Zin	Country	Zip	Country	Trust Fund Contribution	Added to Fees
Zip				This corporation owes the cur Personal Property Tax.	rent year intangible
24	25 9. Name and Address of Current	t Registered Agent	30	10. Name and Address of New	
	5. Name and Address of Contem	t Neglatered Agent	81 Name	TV. Harrie and Padress St. Itali	
STRI	INGFELLOW, MARTIN B				
	KIRKMAN ROAD, SUITE 790		82 Street Add	ress (P.O. Box Number is Not Accept	able)
	ANDO FL 32819	•	83	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	water from the late of the file of
UNL					"路路路路路路路路
UNL			84 City		85 Zip Code
OnL			D4 City		
	to the provisions of Sections 607 0502	2 and 607 1508. Florida Statute		poration submits this statement for the	FL
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	2 and 607.1508, Florida Statute of Florida. Such change was at	es, the above-named corputhorized by the corporati	poration submits this statement for the ion's board of directors. I hereby acce	FL
11. Pursuant office or reagent. I as	to the provisions of Sections 607.0502 egistered agent, or both, in the State om familiar with, and accept the obligat	2 and 607.1508, Florida Statute of Florida. Such change was a tions of, Section 607.0505, Flor	es, the above-named corputhorized by the corporati	poration submits this statement for the ion's board of directors. I hereby acce	FL
11. Pursuant office or reagent. Lat	m familiar with, and accept the obligat	tions of, Section 607.0505, Flor	es, the above-named corputhorized by the corporational Statutes.		FL
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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 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.

6.4 CITY-ST-ZIP

SIGNATURE:

FILED

Feb 11, 1999 8:00am

Secretary of State

02-11-1999 90009 011 ***150.00