DOCU	IONPROFIT RPORATION IUAL REPORT 1999 IMENT # 7669 OOLLAR III, INC.	FLORIDA DEPART Katherine Secretary DIVISION OF CO	of State		991 600 1/ALL	FIL MAR 24 IL WAY AMASSE	AH S): 35 TATE DRIĐA
Principal Piace of Business Malling Address 8050 SOUTH A1A 8050 SOUTH A1A ST. AUGUSTINE FL 32086 ST. AUGUSTINE FL 32088					13011 1801 1818 6141 1180 118			
2. Principal F	Place of Business	2a. Mailing Address			3. Date Incorporated or Qualifed		-	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			02/11/1983 4. FEI Number		Ap	plied For
22 City & Sta	ite	City & State			59-2269575		\$8.75	Applicable Additional
23 Zip	28		Country		Certificate of Status Desired Election Campaign Financing		Fee Re	
' ' '			30		Trust Fund Contribution 10. Name and Address of New R		Added	
	PHILIP H A BCH BLVD, STE 100 REAR		81	Name Street Addr	ress (P.O. Box Number is Not Accepta			
ST AUGU	ISTINE FL 32084		83	City		Ft	85 Zip (Code
office or i	registered agent, or both, in the S	State of Floride. Such change was auth	the above- torized by the	named corp na corporation	oration aubmits this statement for the pon's board of directors. I hereby accept	purpose of chit ithe appoints	anging its rent as re	registered giştəred
office or i agent. I a SIGNATURE	Signature, typed or printed series of registers				oration submits this statement for the par's board of directors. I hereby accept a when refereble; ADDITIONS/CHANGES TO OFF	DATE		
SIGNATURE 12. TITLE	Signature, typed or printed same of register OFFICER	ed agent and life if applicable \$40TE: Re	gistered Agent (13. 1.1 TITLE		d when selectating)	DATE ICERS AND		
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, ispect or protect warms of registers OFFICER DS ATZ, GLADYS 909 PARK FOREST LN	ad apent and Mile if applicable PHOTE: Re S AND DIRECTORS	galared Agent i 13. 1.1 TITLE 1.2 NAME 1.3 STREET A	DORESS	d when selectating)	DATE ICERS AND	DIRECTO	RS IN 12
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