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**

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90226 025 ***150.00

DOCUMENT # **F97638** 1. Corporation Name

WILLIAMS, BRYANT, GAUTIER & DONOHUE, P.A.

Williams & Gautier P.A.

WIL	nams 1 James	C. ,							
Principal Place of Business Mailing Address						f ittill site sett team elles sites leit aver a			
2010 DELTA BOULEVARD P O BOX 4128 TALLAHASSEE FL 32303 US		2010 DELTA BOULEVARD P O BOX 4128 TALLAHASSEE FL 32303 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 08/31/1982				
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	Ar	plied For	
21		26				59-2213062	No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional	
22	· · · · · · · · · · · · · · · · · · ·	27				5. Certificate of Status Desired	Fee Re	equired	
City & State	9	City & State				Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Zip	Country		Zip Country			8. This corporation owes the current year Intangible			
24	25 29 30		30	•		Personal Property Tax.	∐Yes	□No	
1	9. Name and Address of Current	t Registered Agent				10. Name and Address of New Registered	Agent		
				81	Name				
WILLIAMS, L. LEE JR. 2010 DELTA BOULEVARD				82	Street Addres	Address (P.O. Box Number is Not Acceptable)			
TALLAHASSEE FL 32303				83					
				84	City	FL	85 Zip	Code	
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE:	Registered	<u>_</u>	I A M		1		
12.	OFFICERS AN	<u> </u>	13.			ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	PD	DELETE	1.1 TITLE				Change	Addition	
NAME	WILLIAMS, L. LEE, JR.			ĺ					
STREET ADDRESS	O TO DEET TO DOCE THE				DORESS			1	
CITY-ST-ZIP	TALLAHASSEE FL	☐ DELETE	1.4 CITY-ST 2.1 TITLE		ZIP		☐ Change	☐ Addition	
TITLE NAME	- 10					,			
STREET ADDRESS	TIEDANO, I . I ADMEN			DORESS					
CITY-ST-ZIP	TALLAHASSEE FL		2.4 CITY-S						
TITLE	SDV	☐ DELETE	3.1 TITLE				Change	☐ Addition	
NAME	GAUTIER, RUSSELL D	SELL D 3.2N		ME					
STREET ADDRESS	2010 DELTA BOULEVARD	3.3 ST		REET AL	DDRESS .				
CITY-ST-ZIP	TALLAHASSEE FL		3.4. CITY-S		ZIP				
TITLÉ		☐ DELETE	4.1 TशLE				☐ Change	☐ Addition	
NAME			4. 2 N						
STREET ADDRESS					DDRESS				
CITY-ST-ZIP		□ nei err		TY-ST-Z	ZIP		Change	Addition	
TITLE		☐ DELETE	5.1 TT 5.2 N/				CT cuarige		
NAME					nnorton				
STREET ADDRESS									
CITY-ST-ZIP				REET AL TY-ST-Z					

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

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

SIGNATURE:

TILE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change

Addition