**PROFIT** CORPORATION **ANNUAL REPORT** 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # G71964** 1. Corporation Name

Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90077 003 \*\*\*150.00

	C. EWING MUNIGAGE AND	MEALIT, INC.						
Principal Plac	e of Business	Mailing Address				- r innylit golt ighol tigiñ igilo ûliti nigi ûl	814 9184) B1814 8181	ASPER BIBLI SBRS
100 N. TAMPA	STREET	100 N. TAMPA ST						
STE 2175		STE 2175						
TAMPA FL 33602 TAMPA FL 33602						DO NOT WRITE IN T	HIS SPACE	<del></del>
US						3. Date incorporated or Qualifed		ł
						11/29/1983		
Principal Place of Business     2a. Mailing Address				- <u>-</u>		4, FEI Number	A	pplied For
21		26				59-2360541		ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired		Additional
22	<u></u>	27				5. Certificate of Otalias Desired	Fee R	equired_
City & Stat	te	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year	Intangible	~
24	25	29	30			Personal Property Tax.	☐Yes	XNo
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Register	ed Agent	
DIA	100 BE14401 0			81  N	lame			}
	OP, BEJAMIN C.			82 8	treet Addre	ss (P.O. Box Number is Not Acceptable)	·	<del></del>
50 N LAURA STREET SUITE 3625				-		os (Fro. Box Hamos is Hotz Gooplas)		İ
	ΓE 2100			83				
JAC	KSONVILLE FL 32202						11	
,				84 0	ity		85 Zip	Code
\ office or r	egistered agent, or both, in the State o im familiar with, and accept the obligation Signature, typed or printed name of registered agent	f Florida. Such change was a ons of, Section 607.0505, Flo	uthorized riđa Stati	l by the utes.	corporation	ration submits this statement for the purpose i's board of directors. I hereby accept the ap	pointment as re	egistered
12	OFFICERS AND	<del></del>	13.	Agent ag	nature reduited	ADDITIONS/CHANGES TO OFFICERS		7DS (A) 12
12.	CDP				I	ADDITIONS/CHANGES TO OFFICERS	VIND DIVECTA	3N3   V 12
NAME		□ DELETÉ		ne –			☐ Change	☐ Addition i
	·	☐ DELETÉ	1.1 TIT		}		☐ Change	Addition
OTDEET ADDOCCO	BISHOP, BENJAMIN C	☐ DELETE	1.2 NA	ME	DECE	·	☐ Change	☐ Addition
STREET ADDRESS	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625	☐ DELETE	1.2 NA 1.3 ST	ME REET AD			☐ Change	Addition
CITY-ST-ZIP	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL		1.2 NA 1.3 ST 1.4 C(1	ME REET ADI TY-ST-ZIF				
CITY-ST-ZIP	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS	☐ DELETE	1.2 NA 1.3 ST 1.4 C(1 2.1 TIT	ME REET ADI TY-ST-ZIA ILE		·	☐ Change	Addition
CITY-ST-ZIP TITLE NAME	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON		1.2 NA 1.3 ST 1.4 C(T 2.1 TIT 2.2 NA	ME REET ADO IY-ST-ZIA ILE IME	•	·		
CITY-ST-ZIP	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625		1.2 NA 1.3 ST 1.4 C(T 2.1 TIT 2.2 NA	ME REET ADI TY-ST-ZIA ILE	•	·		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL	☐ DELETE	1.2 NA 1.3 ST 1.4 CT 2.1 TT 2.2 NA 2.3 ST 2.4 CT	ME REET ADI IY-ST-ZI ILE ME REET ADI ITY-ST-ZI	DRESS		☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL TS		1.2 NA 1.3 STI 1.4 C(II 2.1 TII 2.2 NA 2.3 STI 2.4 C(II 3.1 TII	ME REET ADI IY-ST-ZIF ILE ME REET ADI ITY-ST-ZIF ILE	DRESS			
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL TS JONES, J B	☐ DELETE	1.2 NA 1.3 ST 1.4 CT 2.1 TT 2.2 NA 2.3 ST 2.4 CT	ME REET ADI IY-ST-ZIF ILE ME REET ADI ITY-ST-ZIF ILE	DRESS		☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL TS JONES, J B 100 N TAMPA ST., STE 2175	☐ DELETE	1.2 NA 1.3 ST 1.4 CT 2.1 TT 2.2 NA 2.3 ST 2.4 CT 3.1 TT 3.2 NA	ME REET ADI IY-ST-ZIF ILE ME REET ADI ITY-ST-ZIF ILE	ORESS P		☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL TS JONES, J B	☐ DELETE	1.2 NA 1.3 ST 1.4 CT 2.1 TT 2.2 NA 2.3 ST 2.4 CT 3.1 TT 3.2 NA 3.3 ST 3.4 CT	ME REET ADI TY-ST-ZIA ME REET ADI TY-ST-ZI LE ME REET ADI TY-ST-ZI TY-ST-ZI TY-ST-ZI	P ORESS		☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL TS JONES, J B 100 N TAMPA ST., STE 2175	☐ DELETE	1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST	ME REET ADI TY-ST-ZIA ME REET ADI TY-ST-ZI LE ME REET ADI TY-ST-ZI TY-ST-ZI TY-ST-ZI	P ORESS		☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL TS JONES, J B 100 N TAMPA ST., STE 2175	☐ DELETE	1.2 NA 1.3 ST 1.4 CT 2.1 TT 2.2 NA 2.3 ST 2.4 CT 3.1 TT 3.2 NA 3.3 ST 3.4 CT	ME REET ADM TY-ST-ZM TLE ME REET ADM TY-ST-ZM TY-ST-ZM TY-ST-ZM TY-ST-ZM TY-ST-ZM TY-ST-ZM TY-ST-ZM TY-ST-ZM TY-ST-ZM	P ORESS		☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL TS JONES, J B 100 N TAMPA ST., STE 2175	☐ DELETE	1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA 3.3 STI 4.1 TIT 4.2 NA	ME REET ADM TY-ST-ZM TLE ME REET ADM TY-ST-ZM TY-ST-ZM TY-ST-ZM TY-ST-ZM TY-ST-ZM TY-ST-ZM TY-ST-ZM TY-ST-ZM TY-ST-ZM	ORESS P		☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL TS JONES, J B 100 N TAMPA ST., STE 2175	☐ DELETE	1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA 3.3 STI 3.4. CI 4.1 TIT 4.2 NA 4.3 STI	ME REET ADI IY-ST-ZI ILE ME REET ADI IY-ST-ZI IE ME REET ADI IY-ST-ZI IE LE AME REET ADI IY-ST-ZI IE AME	ORESS P		☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL TS JONES, J B 100 N TAMPA ST., STE 2175	☐ DELETE	1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA 3.3 STI 3.4. CI 4.1 TIT 4.2 NA 4.3 STI	ME REET ADO IY-ST-ZIF ILE ME REET ADO ITY-ST-ZI IE ME REET ADO IY-ST-ZI IE AME REET ADO IY-ST-ZI IY-ST-ZI IY-ST-ZI	ORESS P		☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL TS JONES, J B 100 N TAMPA ST., STE 2175	☐ DELETE	1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA 3.3 STI 3.4. CI 4.1 TIT 4.2 NA 4.3 STI 4.4 CIT	ME REET ADD  Y-ST-ZE  ME REET ADD  TY-ST-Z  LE  ME REET ADD  TY-ST-Z  LE  REET ADD  TY-ST-Z  LE  REET ADD  TY-ST-Z  LE  REET ADD  TY-ST-Z  LE  REET ADD	ORESS P		☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TAME STREET ADDRESS CITY-ST-ZIP TITLE	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL TS JONES, J B 100 N TAMPA ST., STE 2175	☐ DELETE	1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NA 4.3 ST 4.4 CII 5.1 TIT 5.2 NA	ME REET ADD  Y-ST-ZE  ME REET ADD  TY-ST-Z  LE  ME REET ADD  TY-ST-Z  LE  REET ADD  TY-ST-Z  LE  REET ADD  TY-ST-Z  LE  REET ADD  TY-ST-Z  LE  REET ADD	P PRESS		☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL TS JONES, J B 100 N TAMPA ST., STE 2175	☐ DELETE	1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 4.1 TIT 4.2 NA 4.3 ST 4.4 CIT 5.1 TIT 5.2 NA 5.3 ST	ME REET ADD ITY-ST-ZI LE ME REET ADD ITY-ST-ZI LE MME REET ADD ITY-ST-ZI LE MME REET ADD ITY-ST-ZI LE MME MME REET ADD ITY-ST-ZI LE MME	PRESS PRESS		☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL TS JONES, J B 100 N TAMPA ST., STE 2175	☐ DELETE	1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 4.1 TIT 4.2 NA 4.3 ST 4.4 CIT 5.1 TIT 5.2 NA 5.3 ST	ME REET ADM IY-ST-ZI LE LE REET ADM REET ADM REET ADM IY-ST-ZI LE LE MME REET ADM IY-ST-ZI LE MME REET ADM REET ADM IY-ST-ZI LE MME REET ADM	PRESS PRESS		☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL TS JONES, J B 100 N TAMPA ST., STE 2175	DELETE  DELETE	1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 4.1 TIT 4.2 NA 4.3 ST 4.4 CIT 5.1 TIT 5.2 NA 5.3 ST 5.4 CIT	ME REET ADM IY-ST-ZI LE LE REET ADM REET ADM REET ADM REET ADM IY-ST-ZI LE REET ADM	PRESS PRESS		☐ Change ☐ Change ☐ Change	Addition  Addition  Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE NAME TITLE TITLE TITLE TITLE	BISHOP, BENJAMIN C 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL AS ANDERSON, SHAARON 50 N. LAURA ST., SUITE 3625 JACKSONVILLE FL TS JONES, J B 100 N TAMPA ST., STE 2175	DELETE  DELETE	1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 4.4 CIT 5.1 TIT 5.2 NA 5.3 ST 5.4 CIT 6.1 TIT 6.2 NA	ME REET ADM IY-ST-ZI LE LE REET ADM REET ADM REET ADM REET ADM IY-ST-ZI LE REET ADM	P P P P P P P P P P P P P P P P P P P		☐ Change ☐ Change ☐ Change	Addition  Addition  Addition

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.

SIGNATURE: