FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

.PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Sep 07, 1999 8:00 am Secretary of State

09-07-1999 90012 002 ***550.00

1999 OCUMENT # A

Corporation Name

MANAGEMENT AFFILIATE	.0, 110	•					• o j3	N 5	A .	
	•					-	613054 -	90012 - 5		
cipal Place of Business	Mailing	Address								
o Deborah Metcalfe	c/o	Deborah	Met	са	lfe					
)l East Rollins Stre						t	OO NOT WE	ITE IN TU	IC CDACE	
lando, Fl 32803		end o , Fl				ļ	DO NOT WRI		.S SPACE	
3	U.S.	,				1	0-/-1-9-8.4			
Principal Place of Business		ilina Addraga		-		4. FEI Númb				Applied For
Tincipal Place of Business	26				•		441645		₩	lot Applicable
Suite, Apt. #, etc.	20	c/o Deborah N								Additional
7,010, 1,411, 1,1,010.	27	2400 Bedford	Roa	d.	•	5. Certifcate	of Status Desired		Fee F	Required
City & State		2nd Floor				6. Election C	ampaign Financing		\$5.00) Мау Ве
•	28	Orlando, Fl 32	2803			Trust Fund	d Contribution		Addec	to Fees
ap Country	1	US				8. This corpo	oration owes the curr	rent year li	ntangible	
25	29						Property Tax.		Yes	□No
9. Name and Address of Curr	rent Registere	d Agent				10. Name an	d Address of New I	Registered	d Agent	
DEPORABLE PORTER			6 . 12 5		Name					
EBORAHOMETCALFE 30	m	, ,	7.75.9	82	Street Ad	dress (P.O. Box Nu	imber is Not Accept	able)		
OI E.GROLLINSTSTREE	. 1		14 mm/ 2 tt		t					24.
RLANDÓ (DEL 32803)		1 3 - 31	-();	83		· · · · · · · · · · · · · · · · ·			(, ,	±±=±-
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Pursuant to the provisions of Sections 607.0			"	1 1				FI	Lil	
Signature, typed or printed name of registered a OFFICERS	AND DIRECTO		13.		t signative requ	nred when reinstating) ADDITIONS	S/CHANGES TO OF	FICERS A		
CD		☐ DELETE	11T	ITLE		-			Change	Addition Addition
SAGER, BILL			12 N	IAME	1	• • •	.=			•
TADDRESS 1545 W. POINSE	TTIA DE	₹	1.3 S	TREET	ADDRESS			•		
H-ZIP AVC'N FARK FL	_									
17.10 ACDET 7 81,7			14 C	ITY-ST	F- ZIP					
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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 dicated 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 ifficer 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 lock 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.