05-04-1999 90031 049 \*\*\*150.00

## 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 # H50680

STRAIGH	IT LINE SERVICES, INC.						
Principal Place of Business Mailing Address				· ·	T (BB(54) DIDI DILI BBILL DILA I IE) I ABIL GIBLI BI	UEL CHUIC DEDEL UI	1011 01011 1001
C/O JANE LEE BURNS C/O JANE LEE BURNS							
1505 6TH AVE W 1505 6TH AVE W					DO NOT WIDITE IN THIS	CDACE	
BRADENTON FL 34205 BRADENTON FL 34205					DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualifed 03/25/1985		
2 Principal D	loop of Business	2a. Mailing Address			4. FEI Number	Anr	olied For
					59-2594329	<u> </u>	Applicable
26     Suite, Apt. #, etc.   Suite, Apt. #, etc.					-\$8.75 A		
27		27			5. Certificate of Status Desired	Fee Re	quired
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	o Fees
Zip Country Z		Zip			8. This corporation owes the current year Into		
24	. 25	29 3	0		Personal Property Tax.		□No
	9. Name and Address of Currer	it Registered Agent	81	Name	10. Name and Address of New Registered	Agent	
RIIR	NS, JANE LEE		61	Name			
1505 6TH AVE W			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
BRADENTÓN FL			83		·		
5.04			0.	<u></u>			
			84		FL	85 Zip C	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	the abov	e-named co	rporation submits this statement for the purpose of	changing its	registered
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auti- itions of, Section 607.0505, Florid	nonzed by la Statute:	r ine corpora S.	tion's board of directors. I hereby accept the appoin	milem as reg	jistered
SIGNATURE							
	Signature, typed or printed name of registered age			nt signature requ	ired when reinstating) DATE	D DIRECTO	DC (N. 12
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition
TITLE	PSD POPERT LINDELL		1.2 NAME				
NAME	Burns, Robert Lindell 1911 79th St. N.W.			T ADDRESS			
STREET ADDRESS	BRADENTON FL		1				
CITY-ST-ZIP TITLE	proj		2.1 TITLE	51-ZP		☐ Change	Addition
NAME			2.2 NAME			_ •	{
STREET ADDRESS	The state of the s		1	ET ADDRESS			
CITY-ST-ZIP			2. 4 CITY-		Same to the same of the same o	-	· ·
TITLE		☐ DELETE	3.1 TITLE			☐ Change	☐ Addition
NAME	•		3.2 NAME				
STREET ADDRESS	·		3.3 STREE	TADORESS			
CITY-ST-ZIP	·		3.4. CITY-	ST-ZIP			
TITLE	☐ DELETE 4.1 TI		4.1 TITLE			☐ Change	☐ Addition }
NAME	137		4, 2 NAME	:			. }
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP	·		4.4 CITY-	ST-ZIP	·		
TITLE	partition		5.1 TITLE			Change	☐ Addition
NAME 1			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP		<del>_</del>	5.4 CITY-5	ST-ZIP			
TITLE		☐ DÉLETÉ	6.1 TITLE			☐ Change	☐ Addition
NAME , .			6.2 NAME	1			
STREET ADDRESS			6.3 STREE	TADORE\$S			

64 CITY-ST-ZIP

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. CITY-ST-ZIP

SIGNATURE:X

DUCKELLIRED