**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MENT # <b>J64970</b> R ONE NETWORK, INC.					į				
Principal Place	e of Business	Mailing Address					f yourise dist only olkin loss som	Til Aftri Alail Ari	iit Biğii min	IS BIEIT MIBIT IONI
P.O. BOX 915797 P.O. BOX 915797 P.O. BOX 915797 LONGWOOD FL 32791-5797 LONGWOOD FL 32791-5797										
2011011000 12	02/3/ 3/3/	2011011000 12 02/3/ 0/11					DO NOT WRI	TE IN THIS	SPACE	
		•				3.	Date Incorporated or Qualifed			
						(	03/27/1987			
2. Principal P	lace of Business	2a. Mailing Address			-		FEI Number			Applied For
22. Principal Place of Business 2a. Mailing Address 2b. 2c. Mailing Address 2c. Mailin			٠	•			59-2800180			Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			-				Certifcate of Status Desired		•	Additional
22		27				3.	Certificate of Status Desired		Fee	Required
City & State	e	City & State				6.	Election Campaign Financing		\$5.0	O May Be
23	28						Trust Fund Contribution	L-,I	Adde	d to Fees
Zip	Country Zip C			Country			This corporation owes the curr	ent year Inta	ngible	/
24	25 29 30					!	Personal Property Tax.		☐ Yes	<u>⊡</u> 4√0
	9. Name and Address of Current	Registered Agent				10.	Name and Address of New F	Registered A	\gent	
			8	11 N	lame					}
JENKINS, BILLY G.				<b>2</b> S	troot Addre	ace (P	O. Box Number is Not Accepta	able)		
221 ROYAL OAKS CIRCLE			"	' <sup>2</sup>   <sup>3</sup>	niesi Ausir	C33 (i .	O. Box (tamber to trot / tocopii	ab.0,		
LONGWOOD FL 32779			8	13			<u> </u>			
									11 =	
			8	14 0	City			FL	85  Zi	p Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	2 and 607.1508, Florida Statutes of Florida. Such change was auti ions of, Section 607.0505, Florid	, the abo horized b la Statute	ove-na by the es.	amed corpo corporatio	oration on's boa	submits this statement for the ard of directors. I hereby acce	purpose of o	tment as	registered registered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	egistered Ag	gent sig	nature required			DATE		
12.	OFFICERS ANI		13.		<del>- '</del>	A	DDITIONS/CHANGES TO OF	FICERS AN		
TITLE	PD	☐ DELETE	1.1 TITLE						Chang	e Addition
NAME	JENKINS, CAROLYN A.		1.2 NAME							]
STREET ADDRESS	221 ROYAL OAKS CIRCLE		1.3 STREE		DRESS					ĺ
CITY-ST-ZIP	LONGWOOD FL		1.4 C/TY-	-ST-ZI	P					
TITLE	STD	☐ DELETE	2.1 TITLE						☐ Chang	e
NAME	JENKINS, BILLY GENE		2.2 NAM	Ε						Į.
STREET ADDRESS	221 ROYAL OAKS CIRCLE	<del></del> ,	2.3 STRE	EET AD	DRESS			- ,		
CITY-ST-ZIP	LONGWOOD FL 2.4		2. 4 CITY	r-ST-Z	ıp j					
TITLE		☐ DELETE	3.1 TITLE	E					☐ Chanç	je 🔲 Addition
NAME	3.2		3.2 NAMI	3.2 NAME			•			
			3.3 STRE	ETAD	DRESS					٠. ا
STREET ADDRESS				3.4. CITY-ST-ZIP						-
CITY-ST-ZIP TITLE				4.1 TITLE					Chang	e Addition
NAME		<del>_</del>	4, 2 NAM	Œ						ļ
!			4.3 STRE		nacee					-
STREET ADDRESS	,		•							İ
CITY-ST-ZIP		☐ DELETE	4.4 CITY 5.1 TITLE		-				Chang	e Addition
TITLE		C) DECEM	5.2 NAMI							
NAME					DDESS					
STREET ADDRESS			5.3 STRE							
CITY-ST-ZIP		C SCIETE	5.4 CITY 6.1 TITLE		<u> </u>		<del></del>		Chang	ge Addition
TITLE		☐ DELETE							☐ Sharif	Jo L. Addissoll
NAME			6.2 NAM	E	1					

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 charged, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 13, 1999 8:00 am Secretary of State

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