**FILED** 

Secretary of State

02-24-1999 90031 027 \*\*\*\*61.25

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **N43725**

1. Corporation Name

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

MOUREY, RICHARD

11501 US 27 S #5

11501 US 27 S #12

SEBRING FL 33870

2509 OAK BEACH BLVD

SEBRING FL

FISHER, LEON

SOLAR, IGY

SEBRING	g Eagles, i	NC.							
Principal Place of Business Mailing Address									
12921 US 98 S SEBRING FL 33871 US US US									
2. Principal P	lace of Business	2a. Mailing Address				3. Date Incorporated or Qualifed			
21		26				06/04/1991			
Suite, Apt. #, etc.			Suite, Apt. #, etc.				4. FEI Number Applied For		
22			27					Applicable	
City & State			City & State				5. Certificate of Status Desired   \$8.75 Additional Fee Required		
Zip		Country	Zip		Country		6. Election Campaign Financing \$5.00 N	May Be	
24	25		29	30			Trust Fund Contribution Added to	Fees	
	9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent		
_	•				81	Name			
MOUREY, RICHARD					82 Street Address (P.O. Box:Number is Not Acceptable) (487-74-787-748-748-748-748-748-748-748-7				
	:27 S #10	,							
						रेट व्यवस्था भेरते महिलाता है। तेन देश क्षित स्थान के वि	1. 数24 机定		
SEBRING FL 33870						City 85 Zip Code			
					84	City	FL   T		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.									
SIGNATURE			Tarres - Trans	A/59E-5-	wistered Agen	) augmatusa E	required when reinstating) DATE		
organization, types of princes					13.	i signature i	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	RS IN 12	
TITLE	р	OF TOLKS AIVE		DELETE	1.1 TITLE		VICE-PRESIDENT	Addition	
NAME	HOWARD, RA	١٧			1.2 NAME		CURTISS, KEVIN		
STREET ADDRESS						المراسقين مند الأميال			
	OFFICIAL FL COUTO				B	1.3 STREET ADDRESS PO 130 × 1275 1.4 CITY-ST-ZIP SEBRING, FL, 33871 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 657 BUTTONWOOD DR.			
CITY-ST-ZIP	TS TR EMSU			DELETE	2.1 TITLE	- 211	SECT. Change	<b>⊠</b> Addition	
NAME	13/7/07/01- 1			2.2 NAME		O A POENTER, WAYNO			
1	10004 110 00			2.3 STREET	ANNDESS	ICT RUTTONWOOD DR.			
STREET ADDRESS	SEBRING FL				2.4 CfTY-S	T 710	56BRING, FL, 33872	ــــــــــــــــــــــــــــــــــــــ	
CITY-ST-ZIP	V	3307 1		DELETE	3.1 TITLE	1-21-	Change	Addition	
	1 *	OCDT	•		3.2 NAME				
NAME CERTAINS	PETREE, ROE   13012 US 98				3.3 STREET	ADORESS			
STREET ADDRESS	SEBRING FL				3.4. CITY-S				
CITY-ST-ZIP	T SEDMING FL			DELETE	4.1 TITLE	(-ZIF	Change	Addition	
DILE	[ •		1					1	

SEBRING FL 33870 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 617, 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.

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

☐ DELETE

☐ DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

ECARPENER 1/11/99 941-655-9628 SIGNATURE:

Addition

Addition

☐ Change

Change