- 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 # P95000029128

AMPROP DEVELOPMENT CORPORATION

Principal Plac	e of Business	Mailing	Address				. (221) 661 (18 1916) 61111 65111			,
6875 ULMERTON RD. 6875 ULMERTON RD.										
			ARGO FL 94641 オラフつ/				DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualife		IIS SPACE	
							04/13/1995	<u></u>		
2. Principal F	Place of Business	2a. Mail	ing Address				4. FEI Number		A	pplied For
21		26					59-3313123			ot Applicable
Suite, Apt.	#, etc.	Suite 27	в, Apt. #, etc.				5. Certifcate of Status Desired	×	•	Additional lequired
City.&:Stat	te	City	City & State				= 6,5 Election Cempaign Financin)	 \$5:00)- _{May Be}
23		28	28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Zip Country				8. This corporation owes the current year Intangible			
24	25	29		30			Personal Property Tax.		Yes	□No
	9. Name and Address of Curr	rent Registered	Agent		ļ.,		10. Name and Address of New	Register	ed Agent	
	EN LEDOV D				81	Name				
	en, Leroy R 5 Ulmerton Rd.					Street Addre	ress (P.O. Box Number is Not Acceptable)			
LAR	GO FL 3484 1				83					
	•				84	City			85 Zip	Code
					<u> </u>			•	L	
office or	to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the obl	ste of Florida. Su	ich change was	authorize	d by	the corporatio	oration submits this statement for the n's board of directors. I hereby acc	e purpose ept the ap	of changing its pointment as re	s registered egistered .
SIGNATURE							· · · · · · · · · · · · · · · · · · ·			
	Signature, typed or printed name of registered				1 Agen	t signature required		DATE	AND DIDEOT	000 4140
12.	r	AND DIRECTO		13.			ADDITIONS/CHANGES TO C	FFICERS	Change	Addition
TITLE	D		☐ DELETE	1.1 T					Change	LJ Addition
NAME	WALSH, PATRICK J			1.2 N						
STREET ADDRESS		- 4		1.3 S	TREET	ADDRESS				
CITY-ST-ZIP	LARGO FL 34641 337	7/			ITY-S	T-ZIP				- Addition
TITLE	D		☐ DELETÉ	2.1 T	TLE	1			Change	Addition
NAME	STEFAN, TIMOTHY P			2.2 N	AME					
STREET ADDRESS				2.3 S	TREET	ADDRESS				
CITY-ST-ZIP	LARGO FL 34641 3974	7/		2.40	CITY-S	T-ZIP				
TITLE.			DELETE	3.1 T	ITLE				☐ Change	Addition
NAME	1		·	` 1 3.2 N	AME					_
STREET ADDRESS	;			3.3 S	TREET	ADDRESS				
CITY-ST-ZIP				3.4. 0	ary-s	T-ZIP				
TITLE			☐ DELETE	4,1 T	TLE				☐ Change	☐ Addition
NAME	•			4.21	IAME					
STREET ADDRESS	8			4.3 S	TREET	ADDRESS		_		
CITY-ST-ZIP				4.4 C	TY-S	T-ZIP		<u>. i</u>		
TITLE			DELETE	5.1 T					☐ Change	☐ Addition
NAME				5.2 N	AME					
STREET ADDRESS	3			5.3 S	TREE	TADORESS				1
CITY-ST-ZIP				5.4 C	ITY-S	T-ZIP			<u></u>	
TITLE			☐ DELETE	6.1 T	ITLE				☐ Change	☐ Addition
NAME .				6.2 N	IAME,					
STREET ADDRESS	6			6.3 S	TREET	ADDRESS				

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 reports 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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90293 016 ***158.75

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