## 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 # P96000034915

FRANKLIN MANAGEMENT SYSTEMS INC.

Principal Place of Busines
2427 SUNSET VISTA DRIVE
ADDING THE PL 24CO7

Mailing Address

2427 SUNSET VISTA DRIVE SPRING HILL FL 34607

## **FILED** Jan 22, 1999 8:00am **Secretary of State**

01-22-1999 90052 026 \*\*\*150.00

3. Date Incorporated or Qualifed

04/18/1996



DO NOT WRITE IN THIS SPACE

		22 145	ailing Address			4. FEI Number	Applied For	
2. Principal Pla	ice of Business	— j````	alling Addition			59-3444032	Not Applicable	
1   26   Suite, Apt. #, etc.   Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional Fee Required		
7								
City & State				6. Election Campaign Financing		\$5.00 May Be		
100					Trust Fund Contribution	Added to Fees		
Zip	Country		Zip Country			8. This corporation owes the current year Intang	jible Zu	
¬ '	. 25	29	30	]	_	Personal Property Tax.	Yes ANo	
4	9. Name and Address of Currer		ed Agent			10. Name and Address of New Registered Ag	ent	
	9. Name and Address of Garts.	×	7 1 v. 1	81	Name		•	
EDANIZI IN POLICE E						ress (P.O. Box Number is Not Acceptable)		
2427 SUNSET VISTA DRIVE				82	Street Addr	ess (P.O. Box Number is Not Adoption)	1. 2.14.15 / 1.00 - 1.00 (1.00	
SPRING HILL FL 34607				83			· 建铁铁铁铁铁铁铁	
ornii	THE TE CTOO!					[3]。22[2] 新疆美国基本教育 <b>新</b> 疆 養養量	14.4 (4.1) [25] [36] [36]	
	References to the second			- 84	City	FL	85 Zip Code	
AND ARTHUR CONTRACTOR OF THE PARTY OF	grand many c		a			is the this statement for the purpose of ch	anging its registered	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of fice 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 of fice 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 of fice or registered agent, or both, in the State of Florida Statutes.								
"" office or re	egistered agent, or both, in the State on familiar with, and accept the obliga	ations of, 6	ection 607.0505, Florid	a Statute	s	11, 1099		
agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.  BRUCE G. FRANKIIIA								
SIGNATURE/	Signature, typed or printed name of registered age	ent and title if ap	pplicable. (NOTE: Re		ent signature require	ad when reinstating); DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
12.	OFFICERS A		rors	13.			Change Addition	
TITLE	D		□ DELETE	1,1 TITLE		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
NAME	Franklin, Bruce			1.2 NAME				
STREET ADDRESS	2427 SUNSET VISTA DRIVE			1.3 STRE	ET ADDRESS			
	SPRING HILL FL 34607			1.4 CITY-	ST-ZIP		T A Latition	
CITY-ST-ZIP	D		☐ DELETE	2.1 TITLE		<del></del>	☐ Change ☐ Addition	
TITLE	FRANKLIN, KELLY "''		,	2.2 NAME	<u> </u>			
NAME	2427 SUNSET VISTA DRIVE			2.3 STRE	ET ADDRESS			
STREET ADDRESS	CODING HILL EL 24507	قائد عام دعات		2. 4 CITY			·	
CITY-ST-ZIP	SPRING HILL FL 34607		DELETE	3.1 TITLE			☐ Change ☐ Addition	
TITLE SIGN	1 (4) カー・カー・オー・オー・オーサイン まご		- OFFE	3.2 NAMI	<b> </b>			
NAME	SCASE VISIT A STORY		,			الفرافها والعودون ويفرا الوراني الريان	- 1 50 (1 Vert192-16) (18)	
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STREET ADDRESS			1	4.3 STR	ET ADDRESS			
CITY-ST-ZIP		_		4.4 CITY	-ST-ZIP		☐ Change ☐ Addition	
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NAME	) ·			5.2 NAM	E	1 · 1	•	
	.)			5.3 STR	EET ADDRESS			
STREET ADDRESS	10			5.4 CITY	-st-zip			
CITY-ST-ZIP	January Company		☐ DELETE	6,1 TITL	Ē	·	☐ Change ☐ Addition	
TITLE G	MA SASTICIONA			6.2 NAM	E	4.5		
NAME SE.	上學術語。在日本學			6.3 STR	EET ADDRESS			
STREET ADDRESS	1			64 CITY	/. ST. 7ID			
CITY-ST-ZIP	1	unitable Africa #111	ng does not qualify for	the even	notion stated in	Section 119.07(3)(i), Florida Statutes. I further certure shall have the same legal effect as if made unde	ify that the information	
14. I hereby	certify that the information supplied	with this fill	ng does not quality for	ate and t	hat my eignatu	ire shall have the same legal effect as if made under	r oath; that I am an	

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as a final distribution 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.