FILED

Jan 22, 1999 8:00am

Secretary of State

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DIVISION OF CORPORATIONS DOCUMENT # P96000075884					Secretary of sea		
					01-22-1999 90003 009 ***150.00		
1. Corporati	MEN # P9600	<i>)</i> 075884			•		
	N INVESTMENT ADVISORS,						
CHOWIN	A HANES HAIENT ADVISOUS.	ING					
				· ·			
•	ice of Business	Mailing Address				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1219-A FRANKLIN CIRCLE 1219-A FRANKLIN CIRCLE							
CLEARWATER FL 33756-815 US CLEARWATER FL 33756-815 US					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	<u> </u>	
					09/11/1996		
Principal Place of Business 2a. Malling Address					4. FEI Number	Applied For	
21	1 26				59-3405018	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					\$ 5	3.75 Additional	
27						Fee Required	
City & State City & State					6. Election Campaign Financing \$	5.00 May Be	
23	,	28				Added to Fees	
Zip	Country	Zip	Cour	ntry	8. This corporation owes the current year Intangible	le ·	
24	25		30		Personal Property Tax.		
	9. Name and Address of Curre	nt Registered Agent		1	10. Name and Address of New Registered Agent	t	
CDOWN WILLIAM CITE				81 Name		•	
CROWN, WILLIAM E III CRO 1219-A FRANKLIN CIRCLE 13 MIS (NO.			ŀ	82 Street Add	ress (P.O. Box Number is Not Acceptable)		
CLEARWATER FL 33756-5815					e tip libit, and legge dages this, was go unger your like land	-2	
OLL	MHAILH FL 33/30-3013		[83			
				84 City	1 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	Zip Code	
<u> </u>	may may a	See a company of the second second		'	┡┖┆		
11. Pursuant	t to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the ab	ove-named corp	poration submits this statement for the purpose of changon's board of directors. I hereby accept the appointmen	ing its registered	
agent: I a	am familiar with, and accept the oblig	ations of, Section 607.0505, Flori	da Statu	tes.	on a source of uncolors, i never accept the appointment	r as registered	
SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: R OFFICERS AND DIRECTORS				Agent signature require	when reinstating) (1999) DATE		
TITLE '	P OFFICERS A	DELETE	13.	F I	ADDITIONS/CHANGES TO OFFICERS AND DIF	RECTORS IN 12 hange	
NAME	CROWN, WILLIAM E. III		1.2 NA			ge Li Addition	
STREET ADDRESS			1 .				
CITY-ST-ZIP	CLEARWATER FL			REET ADDRESS			
TITLE	ST	☐ DELETE	1.4 CIT 2.1 TITL	Y-ST-ZIP		hange	
NAME	CROWN, ROBERT E.		2.1 IIIL			nange [Moullion	
STREET ADDRESS			1	1	•		
CITY-ST-ZIP	CLEARWATER FL	the gate set a seen per place		Y-ST-ZIP			
TITLE	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	DELETE	2. 4 CfT			hange	
NAME TO THE	Way Williams		3.1 IIIL	_		irange Lii Add@00	
STREET ADDRESS	製造がも とうががない カルビー カンザービ ネコニ	P. Communication of the Commun		· ·			
CITY-ST-ZIP	植物的排作 30日100日			EET ADORESS	。	作等问题的	
TITLE		☐ DELETE	3.4. CIT 4.1 TITL	Y-ST-ZIP	<u> </u>	THE PROPERTY OF THE PROPERTY O	
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NAME STREET ADDRESS			4. 2 NA	1	· · · · · · · · · · · · · · · · · · ·		
CITY-ST-ZIP	A BLAUSING	All Section 1885 in the second section 1885.		EET ADORESS		* * *	
TITLE	1 2 2	☐ DELETE	4.4 CITY 5.1 TITL	/-ST-ZIP	The contract of the contract o	anno E Addis	
NAME			5.1 I/IL		· · · · · · · · · · · · · · · · · · ·	nange ; [Addition	
STREET ADDRESS			1	EET ADDRESS	Although A		
	l p	:		-ST-ZIP	na na kali	•	
CITY-ST-ZIP			5.4 CHY	-01-22			
TITLE	Printed and Printed Control	☐ DELETE	6.1 TITL	E	□ Ch	nange	

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 one an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP

CLEARWATEL.



121-446-3091