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

Mailing Address

34938 LEARN ROAD

LEESBURG FL 34788

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT-# P98000084431

Principal Place of Business 34938 LEARN ROAD

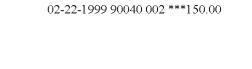
SIGNATURE:

LEESBURG FL 34788

THE MONTAGUE COMPANY, INC.

						09/30/1998		
2. Principal Pla	ace of Business	2a. Maiti	ng Address			4. FEI Number	Apı	plied For
21	26					59-3537458	No	t Applicable
Suite, Apt.						5. Certificate of Status Desired	\$8.75 A Fee Re	
City & State			& State			6. Election Campaign Financing	\$5.00	May Be
¬ '	28					Trust Fund Contribution	Added to	•
Zip	Country					8. This corporation owes the current ye	ar Intangible	
24	25	29	[3	10		Personal Property Tax.	∐Yes	No .
	9. Name and Address of Current					10. Name and Address of New Regist	ered Agent	
MONTAGUE, CHARLES A JR 34938 LEARN ROAD LEESBURG FL 34788				81				
				92				
				02	82 Street Address (P.O. Box Number is Not Acceptable)			<u>;</u> ;
				83	83			1.
				84	City		FL 85 Zip C	
office or re	enistered agent or both in the State o	i Florida, Su	ch change was au	norized by	tne corporation	poration submits this statement for the purpo on's board of directors, I hereby accept the	se of changing its appointment as re	registered gistered
agent. I ar	n familiar with, and accept the obligation	ons of, Sect	on 607.0505, Flori	aa Statutes	•			
SIGNATURE	Signature, typed or printed name of registered agent	and title if contic	phla (NOTE 5	Panistared Anen	t signature zeguire	ad when reinstating) DA	TE	
12.	OFFICERS AND			13.	t aignotore require	ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTO	RS IN 12
TITLE	D	DIRECTO	DELETE	11 TITLE			Change	☐ Addition
	MONTAGUE, CHARLES A JR			1.2 NAME				
NAME	34938 LEARN ROAD			1.3 STREET	ADORESS			
STREET ADDRESS	LEESBURG FL 34788			1.4 CITY-S				
CITY-ST-ZIP	D		☐ DELÉTE	2.1 TITLE	I-ZIP		Change	Addition
TITLE	<del>-</del>			2.2 NAME	1		<del></del>	
NAME	MONTAGUE, GERTRUDE I 34938 LEARN ROAD			2.3 STREET	ADDDEES			
STREET ADDRESS								
CITY-ST-ZIP	LEESBURG FL 34788		☐ DELETE	2.4 CITY-S 3.1 TITLE	1-ZIP		[ ] Change	Addition
TITLE			- OCCUIE	3.2 NAME			,	_
NAME								
STREET ADDRESS				3.3 STREET	l			
CITY-ST-ZIP			OCI CTC	3.4. CITY- S	T-ZIP		Change	[ ] Addition
TITLE			☐ DELETE	4.1 TITLE			□ Ollarige	١١٥٥١١، ب
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4 4 CITY-S	T-ZIP		☐ Change	Addition
TITLE			☐ DELETE	5.1 TITLE				
NAME				5.2 NAME			•	
STREET ADDRESS				5.3 STREE	i			
CITY-ST-ZIP				5.4 CITY-S	T-ZIP		- Oh-	
TITLE			☐ DELETE	61 TITLE			Change	☐ Addition
NAME				6.2 NAME				
STREET ADDRESS				6.3 STREE	i			
CITY-ST-ZIP				6.4 CITY-S				<del></del>
14 I horoby	certify that the information supplied with	this filing d	oes not qualify for	the exempt	on stated in	Section 119.07(3)(i), Florida Statutes. I furth e shall have the same legal effect as if mad	er certify that the i	information
officer or	on this annual report or supplemental director of the corporation or the receiv or Block 13 if changed, or on an attach	er or truste	e empowered to ex	ecute this r	eport as requ	e shall have the same legal effect as it mad irred by Chapter 607, Florida Statutes; and	that my name app	ears in

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



DO NOT WRITE IN THIS SPACE