

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

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Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90050 002 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000000307

1. Corporation Name
FTF, INC.

Principal Place of Business
6923 MUNICIPAL DRIVE
ORLANDO FL 32878

Mailing Address
6923 MUNICIPAL DRIVE
ORLANDO FL 32878

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/02/1998

4. FEI Number
59-3489175
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21. Suite, Apt. #, etc.

23. City & State

24. Zip 32819 25. Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip 32819 29. Country

9. Name and Address of Current Registered Agent

FIDelo, ALAN B
7912 BRIDGESTONE DRIVE
ORLANDO FL 32835

10. Name and Address of New Registered Agent

81. Name Alan B. Fidelo
82. Street Address (P.O. Box Number is Not Acceptable)
~~7912 Bridgestone Drive~~
83. 6923 Municipal Drive
84. City Orlando FL 85. Zip Code 32819

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 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 607.0505, Florida Statutes.

SIGNATURE: Alan B. Fidelo - Director

Alan Fidelo

4/23/99

Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME FIDelo, ALAN
STREET ADDRESS 7912 BRIDGESTONE DRIVE
CITY-ST-ZIP ORLANDO FL 32835 ☐ DELETE

TITLE D
NAME FORESTER, JOHN B JR
STREET ADDRESS 30 CORNWALL CT
CITY-ST-ZIP CASSELBERRY FL 32707 ☐ DELETE

TITLE D
NAME TOPEL, DOMINIC V
STREET ADDRESS 10016 GALTON LANE
CITY-ST-ZIP ORLANDO FL 32821 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.073(j), 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 on an attachment with an address, with a different like empowered.

SIGNATURE: Alan Fidelo Alan Fidelo / Director

4/23/99

407-248-0105

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)