**PROFIT** CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT #

Country

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Zip

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City & State

Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name CHERRY, RICHARD G Street Address (P.O. Box Number is Not Acceptable) 1665 PALM BEACH LAKES BLVD, STE 600 WEST PALM BEACH FL 33401

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Country

Zip Code 84 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			Trained where reinstaline)
		lagistared Agent signature (	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AND DIRECTORS	13.	D Change Addition
πιLE	☐ DELETE	1.1 TITLE	
NAME		12 NAME	FINCH, III R. 2100 EMERALD DUNES DRIVE
STREET ADDRESS		1.3 STREET ADDRESS	SIDO EMERALIS BUNES DELLE
CITY-ST-ZIP		1.4 CITY-ST-ZIP	W. PALM BEACH, FL 33411
TITLE	□ Dalete	2.1 TTILE	Change PAddition
NAME		2.2 NAME	FINCH, JK. K.
STREET ADDRESS		2.3 STREET ADDRESS	FINCH, JR. R. 2100 EMERALO DUNES DRIVE
CITY-ST-ZIP	·	2.4 CTTY-ST-ZIP	W. PALM BEACH, HL 22411
TITLE	☐ DELETE	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP	· ·	3.4. CFTY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADORESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	51 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		8.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITV. 67. 71D		84 CITY-ST-ZP	

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 securate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation for the receiver of trustee expowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, from an attachment with an address, with all other like empowered.

**SIGNATURE:** 

**FILED** May 07, 1999 8:00 am Secretary of State

05-07-1999 90135 013 \*\*\*150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed 05/26/1998

65-0839117

5. Certificate of Status Desired

s. Election Campaign Financing

This corporation owes the current year Intangible
Personal Property Tax.

Trust Fund Contribution

Personal Property Tax.

4. FEI Number

= -**=**: 므:

Applied For

Fee Required \$5.00 May Be-

Added to Fees

□ No

Not Applicable \$8.75 Additional