Mar 05, 1999 8:00 am Secretary of State

FILED

03-05-1999 90065 022 ***150.00

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 # 120969

ARLINGTON CORPORATION

Principal Place of Business Mailing Address	
6156 KINGS ROAD NORTH 6156 KINGS ROAD NORTH	
JACKSONVILLE FL 32205 JACKSONVILLE FL 32254	RITE IN THIS SPACE
US 3. Date Incorporated or Qualife	
10/11/1929	-
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For
21 26 59-0816617	Not Applicable
Suite Ant # etc.	\$8.75 Additional
22 5. Certifcate of Status Desired	Fee Required
City & State City & State 6. Election Campaign Financin	-
23 Trust Fund Contribution	Added to Fees
Zip Country Zip Country 8. This corporation owes the co	
24 25 29 30 Personal Property Tax.	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of Nev	w Registered Agent
PITTMAN, NATALIE P	
6156 KINGS RD., N. 82 Street Address (P.O. Box Number is Not Acce	eptable)
JACKSONVILLE, FL 83	
JACKSONVILLE FL 32254	
84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the corporation submits submits the corporation submi	he purpose of changing its registered
11. Pursuant to the provisions of Sections 607,0002 and 607,1008, Florida Statutes, the advertising of Sections 607,0002 and 607,1008, Florida Statutes, the advertising of Sections 607,0002 and 607,1008, Florida Statutes, the advertising of Sections 607,0002 and 607,1008, Florida Statutes, the advertising of Sections 607,0002 and 607,0002 an	cept the appointment as 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 according to the corporation of the corporati	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby accapent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accagent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	DATE
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby ade agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accapent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby ade agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO COMMITTED TO STATE TO	DATE OFFICERS AND DIRECTORS IN 12
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accepts agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO COUNTIES TITLE PD DELETE 1.1 TITLE	DATE OFFICERS AND DIRECTORS IN 12
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO COMMENT. TITLE PD ITTLE PD ITTLE PLITTMAN, NATALLE P. 2450 (MNDO DOAD MODEL)	DATE OFFICERS AND DIRECTORS IN 12 Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO CONTILLE NAME PD PITTMAN, NATALIE P. 1.2 NAME 1.3 STREET ADDRESS 1.3 STREET ADDRESS	DATE OFFICERS AND DIRECTORS IN 12
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accepts agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO COMMENT OF INTERPOSED ADDITIONS/CHANGES TO COMMENT OF INT	DATE OFFICERS AND DIRECTORS IN 12 Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accepts agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO COMMENTED TITLE PD PITTMAN, NATALIE P. 1.1 TITLE PITTMAN, NATALIE P. 1.2 NAME 1.3 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL D D DELETE 2.1 TITLE 2.1 TITLE	DATE OFFICERS AND DIRECTORS IN 12 Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accepts agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO COMMENT OF TITLE NAME PITTMAN, NATALIE P. 1.2 NAME 1.3 STREET ADDRESS CITY-ST-ZIP DACKSONVILLE FL 1.4 CITY-ST-ZIP DELETE 2.1 TITLE NAME PITTMAN, JOHN A. 6156 KINGS ROAD NORTH 2.2 NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 2.4 CITY-ST-ZIP JACKSONVILLE FL 2.4 CITY-ST-ZIP	DATE OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accepts agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO COMMINE DELETE 1.1 TITLE	DATE OFFICERS AND DIRECTORS IN 12 Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accepts agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO COMMENT OF TITLE DELETE 1.1 TITLE 1.2 NAME 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 1.4 CITY-ST-ZIP 1.4 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE DELETE 2.1 TITLE DELETE 2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 2.4 CITY-ST-ZIP JACKSONVILLE FL 2.4 CITY-ST-ZIP JACKSONVILLE FL 2.4 CITY-ST-ZIP JACKSONVILLE FL 2.4 CITY-ST-ZIP 3.4 CITY-ST-Z	DATE OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accepts agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO COMMENT OF THE PROPERTY OF TH	DATE OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accepts agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO COMMENT OF TITLE NAME PITTMAN, NATALIE P. 1.3 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL DELETE 1.4 CITY-ST-ZIP JACKSONVILLE FL DELETE 2.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 3.3 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.5 STREET ADDRESS 3.5 STREET ADDRESS 3.6 STREET ADDRESS 3.7 STREET ADDRESS 3.7 STREET ADDRESS 3.8 STREET ADDRESS 3.9 STREET ADDRESS 3.1 STREET ADDRESS 3.1 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP	DATE OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the Corporation's board of directors. Thereby accepts agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO CONTINUE. TITLE NAME PITTMAN, NATALIE P. 6156 KINGS ROAD NORTH 1.3 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL DELETE DELETE 22 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE 3.3 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE AACKSONVILLE FL DELETE 4.1 TITLE TITLE DELETE 4.1 TITLE	DATE OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
office or registered agent, or both, in the State of Florida. Such change was auturonzed by the corporation's board of directors. Thereby accepts agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO COMMENT TO THE POINT OF THE	DATE OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
office or registered agent, or both, in the State of Florida, Such change was autmorized by the corporation's board of directors. Thereby accepts agent and mailiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO COME. TITLE POTTTMAN, NATALIE P. 1.1 TITLE NAME STREET ADDRESS GITY-ST-ZIP JACKSONVILLE FL DELETE 1.4 CITY-ST-ZIP TITLE DELETE 1.5 TITLE DELETE 1.6 CITY-ST-ZIP DELETE 3.1 TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE DELETE 3.2 NAME 3.3 STREET ADDRESS GITY-ST-ZIP TITLE DELETE 4.1 TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE DELETE 4.1 TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE ALC CITY-ST-ZIP TITLE ALC CITY-ST-ZI	DATE OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the agent, a militar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12.	DATE OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
office or registered agent, or both, in the State of Horida, Such change was authorized by the corporation's board of directors. Thereby and agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12.	DATE OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature Signatu	DATE OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Floridal Statutes. Signature	DATE OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the Corporation's Board of directors. Floridal Statutes. Signature	DATE OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Floridal Statutes. Signature	DATE OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition

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 cath; 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 all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP