

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

FILED
Apr 08, 1999 8:00 am
Secretary of State

04-08-1999 90033 013 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # 136557

1. Corporation Name
EELBECK INVESTMENTS, INC.



Principal Place of Business

5148 W BEAVER ST
 JACKSONVILLE FL 32210
 US

Mailing Address

BOX 40-ORTEGA STATION
 JACKSONVILLE FL 32210-0040
 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 **ABOVE**

Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 **ABOVE**

Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

10/06/1938

4. FEI Number

59-0231330

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

MEHAFFEY, HUBERT G
 4301 ROOSEVELT BLVD.
 JACKSONVILLE FL 32210

10. Name and Address of New Registered Agent

81 Name

SAME

82 Street Address (P.O. Box Number is Not Acceptable)

BOX 40-ORTEGA STATION

83

84 City

JAX

FL

85 Zip Code

00 32210-40

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

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 NAME DELETE

SD
 MEHAFFEY, IDALEE B
 909 ARTHUR MOORE DR.
 GREEN COVE SPGS. FL

TITLE NAME DELETE

D
 SHIELDS, LENORA M
 2020 COUNTRY CLUB TERRACE
 PALATKA FL

TITLE NAME DELETE

PDT
 MEHAFFEY, HUBERT G
 909 ARTHUR MOORE DR.
 GREEN COVE SPGS. FL

TITLE NAME DELETE

VD
 MEHAFFEY, H. G., JR.
 3448 N. STATE RD 13
 JACKSONVILLE, FL 00000

TITLE NAME DELETE

TITLE NAME DELETE

TITLE NAME DELETE

TITLE NAME 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

**1504 NW 65th AVE
 MARGATE, FL 33063**

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

ZIP 32259

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 119.07(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 on an attachment with an address, with all other like exemption.

SIGNATURE: **HUBERT G. MEHAFFEY, SR.**
 Signature and typed or printed name of signing officer or director

4-5-99 904-781-7525
 Date Daytime Phone #

CR2E034 (1/198)