

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

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90083 037 ***150.00

DOCUMENT # **142289**

1. Corporation Name

OVERSTREET INVESTMENT COMPANY

Principal Place of Business

200 E ROBINSON ST SUITE 875
P.O. BOX 111
ORLANDO FL 32802
US

Mailing Address

200 E. ROBINSON ST SUITE 875
P.O. BOX 111
ORLANDO FL 32802
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/21/1927

4. FEI Number

59-0386870

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

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PARKER, MARION J.
200 E. ROBINSON STREET
STE. 875
ORLANDO FL 32801

81 Name

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

83

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 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 D ☐ DELETE
NAME OVERSTREET, SARA L
STREET ADDRESS 1735 BARCELONA WAY
CITY-ST-ZIP WINTER PARK FL

TITLE D ☐ DELETE
NAME COLLINS, CHARLES J. J
STREET ADDRESS 2010 FORREST ROAD
CITY-ST-ZIP WINTER PARK FL

TITLE PD ☐ DELETE
NAME WEISS, HARRY J. JR.
STREET ADDRESS 1108 BAHAMA DRIVE
CITY-ST-ZIP ORLANDO FL

TITLE SDAT ☐ DELETE
NAME TOLLESON, ANNE E.
STREET ADDRESS 1890 CASTLEWAY LANE, NE
CITY-ST-ZIP ATLANTA GA

TITLE TD ☐ DELETE
NAME ROBIN O. SHELDON
STREET ADDRESS 2521 SHREWSBURY ROAD
CITY-ST-ZIP ORLANDO FL

TITLE VASD ☐ DELETE
NAME MARION J. PARKER
STREET ADDRESS 2812 CADY WAY
CITY-ST-ZIP WINTER PARK FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME D
1.3 STREET ADDRESS E. E. WALLER, III
1.4 CITY-ST-ZIP 3511 HARGILL DRIVE
ORLANDO, FL. 32806

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 119.07(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 empowered.

SIGNATURE:

Marion J. Parker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARION J. PARKER 4/14/99 (407) 425-2645

Date

Daytime Phone #

CR2E034 (1/98)