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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 215982

Corporation Name

ELLIS K. PHELPS & CO.

			<u> </u>							
Principal Place of Business Mailing Address										
2.02 01.1111. 02.01			152 Sprint BLVD. Popka FL 32703				DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed			
							10/02/1958		ĺ	
2. Principal P	lace of Business	2a	a. Mailing Address				4. FEI Number	Ar	plied For	
21		26]				59-0843474	No	ot Applicable	
Suite, Apt.	#. etc.	1-01	Suite, Apt. #, etc.					\$8.75	Additional	
22	4	27	}				5. Certificate of Status Desired	Fee Re	equired	
City & State	e	1	City & State				6. Election Campaign Financing	\$5.00	May Be	
23		28					Trust Fund Contribution	Added	to Fees	
Zip	Country		Zip	Cou	ntry		8. This corporation owes the current year In		_	
24	25	29		30			Personal Property Tax.	X Yes	□No	
Name and Address of Current Registered Agent							10. Name and Address of New Registered	Agent		
			•		81	Name				
OBEE, RONALD					82	Street /	Address (P.O. Box Number is Not Acceptable)			
328 TERSAS CT										
LAKE MARY FL 32746					83					
					84	City		85 Zip	Code	
						•	FI	_		
office or n	egistered agent, or both, in the State	of Flori	ida. Such change was a	uthorized	i by '	tne corpo	corporation submits this statement for the purpose opation's board of directors. I hereby accept the apporation	f changing its intment as re	registered egistered	
agent. I a	m familiar with, and accept the obligation	tions of	f, Section 607.0505, Flo	rida Statı	utes.					
SIGNATURE	Signature, typed or printed name of registered ager			· Doglatored	0000	t sionatura r	equired when reinstating) DATE			
12.	OFFICERS AN		<u> </u>	13.	Agair	t signature re	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	DRS IN 12	
TITLE	T	D Dire	DELETE	1.1 TI	TLE		CFO	Change	☐ Addition	
NAME	BUSSART, GARY B			1.2 N			Bussart, Gary B.			
STREET ADDRESS	133 WEST STOVIN AVE.					AODRESS	1325 Sunnyside Dr.			
	WINTER PARK FL 32789						Winter Park, FL 32789			
CITY-ST-ZIP TITLE					1.4 CITY-ST-ZIP W 1		Willer Park, FL 32709	☐ Change	Addition	
	· ·			2.1 11 2.2 N/					_	
NAME	OBEE, RONALD					ADDRESS				
STREET ADDRESS	328 TERSAS COURT								l	
CITY+ST-ZIP	LAKE MARY FL	-	☐ DELETE	2. 4 C	<u>лү-5</u> п ғ	1-ZIF	EVPS	Change	Addition	
[EVPS CALVAGE COLLABOR D			3.1 N			Snyder, Johnny R.		_	
NAME	SNYDER, JOHNNY R.					ADDRESS	569 Sabal Lake Dr, #20	1		
STREET ADDRESS	1614 WHITE DOVE DR.						Longwood, FL 32779	_		
CITY-ST-ZIP	WINTER SPRINGS FL		☐ DELETE	3.4. C	117-5 TLF	1-217	Hollywood, III J2113	Change	Addition	
TITLE	VP		LJ OCLETC							
NAME	CITARELLA, JUAN A.			4.2 N						
STREET ADDRESS	2275 SPRINGS LANDING BLVD	,				ADDRESS				
CITY-ST-ZIP	LONGWOOD FL			4.4 CI	TY-S1	-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 for on an adapting in with an address, with all other like empowered.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

ME OF SIGNING OFFICER OR DIRECTOR

DELETE

☐ DELETE

Bussart, C

CFO 2/22/9

(407)880-2900

Daytime Phone #

Change

☐ Change

☐ Addition

■ Addition

22F034 (11/98)