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

**PROFIT CORPORATION** ANNUAL REPORT

1999

**DOCUMENT # 384009** 



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90038 036 \*\*\*150.00

	ONE AND REDSTONE, IN				
Principal Place	14	Mailing Address			
333 17TH 51: 1940 10 10 10 10 PO BOX 310					
VERO BEACH FL 32960				DO NOT WRITE IN TH	IS SPACE
	= := : • •			3. Date Ir corporated or Qualifed	
				06/17/1971	
2. Principa Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-1355832	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible
24	25	29	30	Personal Property Tax.	XXYes [∃No
	9. Name and Address of Cu			10. Name and Address of New Register	ed Agent
			81 Name		
	STONE,PAUL C		82 Street Acc	dress (P.O. Box Number is Not Acceptable)	
	<del>1/1113</del> 1:		1940		
SUIT			83		
VERG	O BEACH FL 32960				7.0.4
			84 City	Beau & F	L 85 Zip Code 32960
11. Pursuant	to the provisions of S∈ctions 607	.0502 and 607.1508, Florida Statu	tes, the above-named ccr	poration submits this statement for the purpose	of changing its registered
office crin	egistered agent, or bo h, in the Si m familiar with, and accept the ob	tate of Florida. Such change was a oligations of, Section 607.0505, Flo	iutnorized by the corporati irida Statutes.	tion's board of ε irectors. I hereby accept the ap	Dintinent as registered
SIGNATURE					
	Signature, typed or printed na ne of registered		Registered Agent signature requir		
12.		S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition
TITLE	P/D	☐ DELETE	1.1 TITLE		Change Addition
NAME	REDSTONE, PAUL C	9.40 10.54 . 5 0	1.2 NAME		
STREET ADDRESS		940 104 aug 5000 C	1.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL 32960		1.4 CITY-ST-ZIP		Charge T Addition
TITLE		□_DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		□ Oberes □ Addition
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			34. CITY-ST-ZIP		Chance CA122
TITLE		☐ DELETE	4 1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRE 3S			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
	i		64 CITY-ST-7IP		

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 recuired 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: