

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

PROFIT
CORPORATION
ANNUAL REPORT



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

1999 2000

DOCUMENT # 446376

1. Corporation Name
SQUARE PEGS ASSOCIATES, INC.

Principal Place of Business
5307 HEMPSTEAD RD
LOUISVILLE KY 40207

Mailing Address
5307 HEMPSTEAD RD
LOUISVILLE KY 40207

FILED

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TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/15/1974

4. FEI Number

59-1512188

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

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

ROSCOW, JOHN
1 S.E. 1ST AVENUE
GAINESVILLE FL 32602

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	PD	<input checked="" type="checkbox"/> DELETE
NAME	GUMMERE (WALTER C.)	
STREET ADDRESS	5307 HEMPSTEAD RD	
CITY-ST-ZIP	LOUISVILLE KY	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	GUMMERE, VIRGINIA J	
STREET ADDRESS	5307 HEMPSTEAD RD	
CITY-ST-ZIP	LOUISVILLE KY	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS	202 Meadow Vista Lane	
1.4 CITY-ST-ZIP	SUN CITY CENTER FL 33573	
2.1 TITLE	DIR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS	202 Meadow Vista Lane	
2.4 CITY-ST-ZIP	SUN CITY CENTER FL 33573	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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-03/29/00-01069-009
****150.00 ****150.00

SP

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:

Walter C. Gummere

WALTER C. GUMMERE

4/3/99 817-634-9685

Walter C. Gummere 3/21/2000

3/21/2000

CR2E034 (11/98)

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20 March 2000

Florida Department of State
Katherine Harris
Secretary of State

Re # 59-1512188

I am writing to be certain I heard correctly, via telephone, instructions as to how to file the Profit Corporation Annual Report for year 2000.

Not having received this year's form, I called several times, and several numbers, in order to get the form.

I was told: "Take last year's report, cross out 1999 and enter 2000." I have done just that, but wanted to note this most unusual way of doing business!

IF THERE IS a form, and if the instructions given me were incorrect, at least you have Square Pegs check.

Very truly yours,

Walter C. Gummere
Walter C. Gummere
President, Square Pegs Associates

202 Meadowvista Lane
Sun City Center, Florida 33573

SQUARE PEGS®  ASSOCIATES, INC.

W.C. GUMMERE
President

202 Meadowvista Lane
Sun City Center, FL 33573
(813) 634-9685