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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 474853

1. Corporation Name

CONTINENTAL BUSINESS HOUSING, INC.

Principal Place of Business	Mailing Address
1340 SCHERER DRIVE St Petersburg FL 33716	3340 SCHERER DRIVE ST PETERSBURG FL 33716
2. Principal Place of Business	2a. Mailing Address
2. Principal Place of Business 21 Suite, Apt. #, etc. 22	2a. Mailing Address 26 Suite, Apt. #, etc.

FILED Apr 12, 1999 8:00 am Secretary of State

04-12-1999 90043 034 ***150.00

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Principal Place of Business Mailing Address											
3340 SCHERER DRIVE 3340 SCHERER DRIVE											
ST PETERSBURG FL 33716 ST PETERSBURG FL 33716					DO NOT MIRIT			MOJTE IN THIS	E IN THIS SPACE		
							3. Date Incorporated or Quali		SPACE		
	1						04/29/1975	ileu			
9 Deimoinal D	Place of Business		ailing Address			<u>-</u>	4. FEI Number		Anr	olied For	
└	race or business	<u> </u>	aning Address				59-2026659		<u> </u>	Applicable	
21 Suite, Apt.	# oto	26	uite, Apt. #, etc.	_			33 2020033		\$8.75 A		
	#, 810.	27	me, Apt. #, ctc.				5. Certifcate of Status Desire	d 🗆	Fee Rec		
City & Star	te *		ity & State			-	6. Election Campaign Finance	ing —	\$5.00	May Re	
23	. ,	28	,, a o				Trust Fund Contribution	a 🗆	Added		
Zip	Country	Zij	0	Cour	ntrv		8. This corporation owes the	current year in			
─ ─ '	25	29	· -	30	•	•	Personal Property Tax.	ourraint your		□No	
24	9. Name and Address of C			101			10. Name and Address of No	w Registered	Agent		
	<u> </u>		<u> </u>	$\neg \neg$	81	Name					
GEH	IRAND, WILLIAM A.			1							
3340	SCHERER DRIVE			Ì	82	Street Addre	ss (P.O. Box Number is Not Acc	eptable)			
ST.	PETERSBURG FL 33716			ŀ	83						
	N										
				ļ	84	City		FI	85 Zip C	ode	
44 Dursuont	to the provisions of Sections 60	7 0502 and 607	1508 Florida Statute	s the ab	nove	named como	ration submits this statement for	the purpose o	f changing its	registered	
office or i	registered agent, or both, in the	State of Florida.	Such change was aut	thorized	DV I	the corporation	's board of directors. I hereby a	ccept the appo	intment as reg	istered	
agent. I a	am familiar with, and accept the	obligations of, Se	ection 607.0505, Florie	da Statu	ites.						
SIGNATURE		- 100 0	No. No.	3 torset	A	t signature required t	uton minetating)	DATE		i	
12.	Signature, typed or printed name of registe	RS AND DIRECT		13.	Agen	t signature required	ADDITIONS/CHANGES TO		ND DIRECTO	RS IN 12	
TITLE	PD	TO AITO DIRECT	DELETE	1.1 7/7	LE .		7,50,110,101,010,101,020,70		Change	Addition	
NAME	GEHRAND, WILLIAM		_	1.2 NA							
STREET ADDRESS	AND A COLUEDED DON'T			1		ADDRESS				ł.	
ł	ST. PETERSBURG FL			1.4 CIT		1				}	
CITY-ST-ZIP	STD		☐ DELETE	2,1 TIT		-2119			☐ Change	Addition	
ļ.	GEHRAND,GERALD L.			2.2 NA		'	•			_ [
NAME	ANA COLIEDED DONE		,	2.2 (104	ME						
STREET ADDRESS				0000	~~~					1	
CITY-ST-ZIP	ST. PETERSBURG FL					ADORESS					
TITLE			□ DCI ETE	2. 4 CI	TY-S	T-ZIP	-	_	Change	Addition	
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Į.			. DELETE	2. 4 CIT 3.1 TITI 3.2 NA 3.3 STI	TY-S LE ME REET	T-ZIP ADDRESS		•	☐ Change	Addition .	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			DELETE	2.4 C/I 3.1 TITI 3.2 NA 3.3 STI 3.4 C/I 4.1 TITI 4.2 NA 4.3 STI 4.4 C/I 5.1 TIT 5.2 NA	TY-ST LE ME REET TY-ST LE REET TY-ST LE ME	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP			☐ Change	Addition	
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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 adaction of the corporation of the corpor

SIGNATURE

William A. Gehrand 4/5/99

727/572-7080