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

DOCUMENT # 527369 1. Corporation Name

ROGERS, DOWLING, FLEMING & COLEMAN, P.A.

Principal Place	of Pusiness	Mailing Address				I			
•	Di Busilless	34 E. PINE ST.							
34 E. PINE ST.	•	34 E. PINE 51. PO BOX 3427							
PO BOX 3427	0004	ORLANDO FL 32801				DO NOT WRITE IN THIS SPACE			
ORLANDO FL 32801		CHERRY TE VEVO				3. Date Incorporated or Qualifed			
						03/09/1977			· \
		A AA-115- Address of				4. FEI Number		Applie	ed For
2. Principal Pla	ace of Business	2a. Mailing Address				59-1737994			pplicable
21		26				39-1/3/994	<u> </u>	5 Add	
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	y	Requi	- 1
22								 `	
City & State	1	City & State	City & State			6. Election Campaign Financing \$5.00 May Be Added to Fees			
23		28				Trust Fund Contribution		ed to h	ees
Zip	Country	Zip .	Cou	intry		8. This corporation owes the current y		_	
24	25	29	30			Personal Property Tax.	Yes		No
24	9. Name and Address of Current		J	Γ		10. Name and Address of New Regis	tered Agent		
	3. 14411		· · · · · · · · · · · · · · · · · · ·	81	Name		•		1
manus was the ID				\perp		N. A.			
ROGERS, W DAVID JR.				82 Street Address (P.O. Box Number is Not Acceptable)					
ORLANDO FL 32801				83		12 S F 14 (28% C25%) 12 G F 1 5	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	7 PA	1.80.5%
URLANDO PL 32001								. इ.स.स. <u>संस्थ</u>	, 300 週
				84	City	the second second second second second	85	Zip Co	de''
				ì I	•		FL		
11 Pursuant I	to the provisions of Sections 607.0502	and 607.1508, Florida Stat	utes, the a	bove	-named corp	oration submits this statement for the purpon's board of directors. I hereby accept the	ose of changing	g KS FB IS redis	gistered tered
office or re	egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florida. Such change was	authonzeo Iorida Stat	a by 1 tutes.	ine corporation	on's board of directors. I hereby accept the	, прропиложе	5	
: "Chagent: I ar	m tamillar with, and accept the obligation	OHS OLIGIBLE OF LOCAL	101144 0141						
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NO	TE: Registered	d Agent	t signature require	d when toursmany).	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICE			S IN 12
TITLE	D	☐ DELETE	1.1 TO	TLE		***	Chai	лде	Addition
	ROGERS, W. DAVID JR.		1.2 N	AME					
NAME					ADDRESS				
STREET ADDRESS	205 JASMINE LANE				ī				
CITY-ST-ZIP	LONGWOOD FL 32750			ITY-ST	r-ZIP				Addition
TITLE	VST					"		nae	_
NAME .	DOWLING, DUNCAN B III	☐ DELETE	2.1 Ti	ITLE		······································	Cha	nge	
STREET ADDRESS		☐ OELETE	2.1 TI 2.2 N				Cha	nge	.
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	1334 HARBOR ISLAND RD.	□ DELETE	22 N 2.3 S	IAME TREET	ì				
CITY-ST-ZIP		□ DELETE	22 N 2.3 S	IAME STREET CITY-S	ì		□ Cha		. Addition
CITY-ST-ZIP TITLE	1334 HARBOR ISLAND RD. ORLANDO FL 32806	☐ DELETE	22 N 2.3 S 2.4 C 3.1 T	IAME STREET CITY-S	ì				. 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 attachment with an address, with an other like empowered.

FILED

Feb 08, 1999 8:00am

Secretary of State

02-08-1999 90053 002 ***150.00