

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # **574724**

1. Corporation Name

P.H.C.S.&W. HOLDINGS, INC.

Principal Place of Business
1403 WEST COLONIAL DR.
ORLANDO FL 32804

Mailing Address
1403 WEST COLONIAL DR.
ORLANDO FL 32804

FILED
Aug 17, 1999 8:00 am
Secretary of State

08-17-1999 90003 028 ***558.75



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/05/1978

2. Principal Place of Business

21

2a. Mailing Address

26

c/o Larry A. Church

4. FEI Number

59-1828272

Applied For

Not Applicable

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

P. O. Box 38

5. Certificate of Status Desired

☒ XX

\$8.75 Additional
Fee Required

City & State

23

City & State

28

Winter Park, FL

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24

Country

25

Zip

29

32790-0038

Country

30

8. This corporation owes the current year
Intangible Personal Property.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PARDUE, WILLIAM P JR.
1403 W. COLONIAL DR.
ORLANDO FL 32804

81 Name

CHURCH, LARRY A.

82 Street Address (P.O. Box Number is Not Acceptable)

600 Courtland St.

83 Ste. 260

84 City

Orlando

FL

85 Zip Code

32804

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.

July 24, 1999

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DP** ☐ DELETE

NAME **PARDUE, WILLIAM P JR.**
STREET ADDRESS **1403 WEST COLONIAL DR.**
CITY-ST-ZIP **ORLANDO FL 32804**

1.1 TITLE

D/P

☒ Change

☐ Addition

NAME **PARDUE, WILLIAM P JR.**
STREET ADDRESS **1403 WEST COLONIAL DR.**
CITY-ST-ZIP **ORLANDO FL 32804**

1.2 NAME

Pardue, William P., Jr.

1.3 STREET ADDRESS

P.O. Box 38

1.4 CITY-ST-ZIP

Winter Park, FL 32790-0038

TITLE **D** ☒ DELETE

NAME **RODGERS, W. CLAY**
STREET ADDRESS **1403 WEST COLONIAL DR.**
CITY-ST-ZIP **ORLANDO FL 32804**

2.1 TITLE

☐ Change

☐ Addition

NAME **RODGERS, W. CLAY**
STREET ADDRESS **1403 WEST COLONIAL DR.**
CITY-ST-ZIP **ORLANDO FL 32804**

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE **DVST** ☐ DELETE

NAME **CHURCH, LARRY A.**
STREET ADDRESS **1403 WEST COLONIAL DR.**
CITY-ST-ZIP **ORLANDO FL 32804**

3.1 TITLE

D/VP/S/T

☒ Change

☐ Addition

NAME **CHURCH, LARRY A.**
STREET ADDRESS **1403 WEST COLONIAL DR.**
CITY-ST-ZIP **ORLANDO FL 32804**

3.2 NAME

Church, Larry A.

3.3 STREET ADDRESS

P.O. Box 38

3.4 CITY-ST-ZIP

Winter Park, FL 32790-0038

TITLE **D** ☒ DELETE

NAME **MOORE, CHERRY**
STREET ADDRESS **1403 WEST COLONIAL DR.**
CITY-ST-ZIP **ORLANDO FL 32804**

4.1 TITLE

☐ Change

☐ Addition

NAME **MOORE, CHERRY**
STREET ADDRESS **1403 WEST COLONIAL DR.**
CITY-ST-ZIP **ORLANDO FL 32804**

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE **D** ☒ DELETE

NAME **ROBBINS, JEFFREY**
STREET ADDRESS **1403 WEST COLONIAL DR.**
CITY-ST-ZIP **ORLANDO FL 32804**

5.1 TITLE

☐ Change

☐ Addition

NAME **ROBBINS, JEFFREY**
STREET ADDRESS **1403 WEST COLONIAL DR.**
CITY-ST-ZIP **ORLANDO FL 32804**

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE **DC** ☒ DELETE

NAME **MOREYRA, ROBERT**
STREET ADDRESS **1403 WEST COLONIAL DR.**
CITY-ST-ZIP **ORLANDO FL 32804**

6.1 TITLE

☐ Change

☐ Addition

NAME **MOREYRA, ROBERT**
STREET ADDRESS **1403 WEST COLONIAL DR.**
CITY-ST-ZIP **ORLANDO FL 32804**

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-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, or on an attachment with an address.

July 24, 1999
407-644-9977

SIGNATURE: **X**

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)