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 # 600794

CARLTON, FIELDS, WARD, EMMANUEL, SMITH & CUTLER, P.A.

Principal Place	e of Business	Mailing Address			•
ONE HARBOUR PLACE ONE HARBOUR PLACE		ONE HARBOUR PLACE			
P O BOX 3239		P O BOX 3239			
TAMPA FL 33601		TAMPA FL 33601			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
					01/17/1969
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			59-1233896 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired 5. Security Status Desir
27				5. Certificate of Status Desired Fee Required	
City & State City 8		City & State	ity & State		6. Election Campaign Financing \$5.00 May Be
23	28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Zip Country		8. This corporation owes the current year Intangible
24	25	29	30		Personal Property Tax.
	g. Name and Address of Curren	t Registered Agent		I	10. Name and Address of New Registered Agent
			- '	81 Name	
- Gilbert, Leonard H					SNOW, THOMAS A. Address (P.O. Box Number is Not Acceptable)
ONE HARBOUR PLACE					One Harbour Place
777 S HARBOUR ISLAND BLVD				83	One narbour rrace
TAMPA FL 33602				<u> </u>	777 S. Harbour Island Blvd.
				84 City	85 Zip Code
		O		<u> </u>	Tampa FL 33602
11. Pursuant	to the provisions of Sections 607.050 egistered agent, or both, in the State	2 ann 607.1508, Fiorida Statute of Florida. Such change was au	s, tne a thorized	bove-named of by the corpo	oration's board of directors. I hereby accept the appointment as registered
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 Thomas A. Snow, President & CEO 3/11/99					
	Signature, typed or printed name of registered ager	D DIRECTORS		Agent signature re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	PD OFFICERS AN	DELETE	, 13. 1.1 TI	ti E	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	· -	C Deterie			
NAME	SNOW, THOMAS A	C LIADROLID IOLAND	1.2 N	,	· 1
STREET ADDRESS	ONE HARBOUR PLACE - 777 S	P. HAHBOUR ISLAND	•	TREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33602-5799	15	_	ITY-ST-ZIP	K) Change : [] Addition
TITLE	C/D	X DELETE	2.1 TI	TLE	, 4 3 14 1
NAME	GILBERT, LEONARD H		2.2 N	AME (WALBOLT, SYLVIA H.
STREET ADDRESS	ESS ONE HARBOUR PLACE-777 S HARBOUR ISLAND		2.3 S	TREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33602-5799		2.40	HTY-ST-ZIP	St. Petersburg, FL 33701-4352 Ave
TITLE	TD	X) DELETE	3.1 11	TLE .	TD Change Addition
NAME	Brown, Mark a		3.2 N	AME	CIOTTI, ROBERT L.
STREET ADDRESS	ONE HARBOUR PLACE-777 S	HARBOUR ISLAND	3.3 S	TREET ADDRESS	One Harbour Place-777 S. Harbour Island
CITY-ST-ZIP	TAMPA FL 33602-5799		1	CITY-ST-ZIP	Tampa, FL 33602-5799
TITLE	S/D	☐ DELETE	4 1 TI		Change Addition
NAME	LINNAN, NANCY G	_	4. 2 N		
	215 S MONROE STREET, SUIT	F 500		TREET ADDRESS	· ·
STREET ADDRESS	TALLAHASSEE FL 32301-1866	2 300		-	
CITY-ST-ZIP	IALLAHASSEE PL SZSUI-1800	☐ DELETE	4.4 C	ITY-ST-ZIP	☐ Change ☐ Addition
TITLE			5.1 II	1	1 Suman
NAME					
STREET ADDRESS				TREET ADDRESS	·]
CITY-ST-ZIP				ITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TI	TLE	Change Addition
NAME			6.2 N	AME	
STREET ADDRESS			6.3 S	TREET ADDRESS	;}
			•	ŧ	į l

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 of suppliemental 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 of 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 of on an attachment with an address, with all other like empowered.

SIGNATURE:

IG OFFICER OR DIRECTOR

Thomas A. Snow, President & CEO 3/11/99 (813)223-7000

FILED

Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90059 002 ***150.00