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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 603960 1. Corporation Name

Principal Place of Business

GOULD, COOKSEY, FENNELL, O'NEILL & MARINE, P.A.

979 BEACHLAND BLVD VERO BEACH FL 32963-1688		979 BEACHLAND BLVD VERO BEACH FL 32963-1688				DO NOT WRITE IN THIS SPACE				
			٠			<ol> <li>Date Incorporated or 0</li> <li>12/01/1972</li> </ol>	Qualifed			
2. Principal Pla	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number			Applied For	
21		26				59-1426911			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status De	esired		5 Additional	
22		27				5. Certificate of Status Di	esired	Fee	Required	
City & State	•	City & State				6. Election Campaign Fire	nancing	\$5.0	00 May Be	
23		28	28			Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Country			8. This corporation owes	the current year Int			
24	25	25 29 30				Personal Property Tax. Yes No				
	9. Name and Address of Current	Registered Agent				10. Name and Address	of New Registered	Agent		
			81	Name					1	
MARINE, CHRISTOPHER H. 1435 50TH COURT			82	Street	Address	ess (P.O. Box Number is Not Acceptable)				
	D BEACH FL 32966		83			***		14.		
¥L1((	S BEACH I'E GEGGG		"					33972 3	16世界18	
			84	City		Tak as A		85 Z	ip Code	
				<u> </u>		// 1 // - Al-1 I - I - I - I - I - I - I - I - I	T L	-   _	ite registered	
	to the provisions of Sections 607.0502 egistered agent, or both, in the State on familiar with, and accept the obligat				oration's	board of directors. I here	by accept the appoint	intment as	s registered	
SIGNATURE		(AIOTE: Box	ristored Age	ent rignature r	required wh	nen reinstating)	DATE		<del></del>	
	Signature, typed or printed name of registered agen OFFICERS AN		13.	ant signature t	required ter	ADDITIONS/CHANGE:		ND DIREC	CTORS IN 12	
TITLE	VC	☐ DELETE	1.1 TITLE		1	*		Chan	ge 🔲 Addition	
	COOKSEY,BYRON T	_	1.2 NAME						_	
NAME	2102 VICTORY BLVD			T ADDRESS	.					
STREET ADDRESS			1.4 CITY-1		1					
CITY-ST-ZIP	VERO BEACH FL	☐ DELETE	2.1 TITLE	31-ZIF				☐ Chan	ge Addition	
TITLE	DPTC BARDELL		2.2 NAME		1					
NAME	FENNELL, DARRELL				.					
STREET ADDRESS	4950 10TH ST			T ADDRESS	<u>'</u>					
CITY-ST-ZIP	VERO BEACH FL			ST-ZIP	+-		<del>-</del>	☐ Chan	age	
TITLE	DV		3.1 TITLE						·	
NAME .	MARINE, CHRISTOPHER H.		3.2 NAME			•			l	
STREET ADDRESS	1435 50TH COURT			ET ADDRESS	<b>`</b>	• • • • • • • • • • • • • • • • • • • •		1		
CITY-ST-ZIP	VERO BEACH FL	☐ DELETE	3.4. CITY-		+	* * * * * * * * * * * * * * * * * * * *	1 2 2	. Chan	nge	
TITLE	DV	( ) DELETE	4.1 TITLE			. '			2 \ \( \lambda \cdot \cd	
NAME	O'NEILL, EUGENE J		4. 2 NAME						•	
STREET ADDRESS	308 INDIAN LILAC RD			ET ADDRESS	3					
CITY-ST-ZIP	VERO BEACH FL		4.4 CITY-		<del> </del>			□ Char	nge	
TITLE	DV	☐ DELETE	5.1 TITLE				•	L; Cliai	ião Dividingia	
NAME	CARTER. DAVID M		5.2 NAME		_[					
STREET ADDRESS	3013 GOLF VIEW DRIVE			ET ADDRESS	5					
CITY-ST-ZIP	VERO BEACH FL	<u> </u>	5.4 CITY-		<b>_</b>			F7.64	MT Addition	
TITLE	DV	☐ DELETE	6.1 TITLE					Char	nge 🗀 Addition	
NAME	FENNELL, TODD W		6.2 NAME						Į	
	ATOR OR AVE		6.3 STRE	ET ADDRESS	s 1				i	

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 accordate 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 of 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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

VERO BCH FL

**FILED** 

Feb 10, 1999 8:00am

**Secretary of State** 

02-10-1999 90048 046 \*\*\*150.00