03-11-1999 90045 020 \*\*\*150.00

## 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 # 604538

1. Corporation Name

WILLIAM C. GREGG, III CHARTERED

***********	o. dileda) iii orii iii eile							
Principal Place	e of Business	Mailing Address			4 (89)(8 hill) agill albai ali		11611 grant asam an	•11 •1511 1461
611 E DRUID RD 611 E DRUID RD								
STE #512 STE 512					DO NOT WOITE IN THE CRACE			
CLEARWATER FL 34616 CLEARWATER FL 34616					DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualifed			
US US					07/05/1973	ied		
Section than the second	The state of the s	2a: Mailing Address		· And Const.		ORT WHEN	New St. A. S. Ann	olied Forwage
622 1	Bypass Dr. #100	622 Bypass	Dr.	#100	EQ-14CCOOQ		No.	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desire	d d	Fee Rec	dditional 🥞 . quired
Créarwater, FL Eréarwate					Election Campaign Financ     Trust Fund Contribution	ing 🗆	\$5.00 h Added to	
Zip 3376	64 Country Pinellas	Zip 33764	Country Pi	nellas	This corporation owes the Personal Property Tax.	current year In		□No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
				Name				
GREGG, WILLIAM C III 611 E DRUID RD #512			82	Street Addr	Address (P.O. Box Number is Not Acceptable)			
CLEARWATER FL 34616			83					
			84	City			85 Zip C	inde
				1		Fi	_   "	
office or n agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was auth	norized by	the corporation	oration submits this statement for on's board of directors. I hereby a	the purpose of ccept the appo	intment as reg	jistered
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable (NOTE: Re	egistered Age	nt signature require	d when reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO	OFFICERS A		
TITLE	PDS DELETE 1.11		1.1 TITLE				XX Change	☐ Addition i
NAME	GREGG, WILLIAM C III		1.2 NAME					
STREET ADDRESS			1.3 STREE		622 Bypass Dr.			
CITY-ST-ZIP	CLEARWATER FL 140		1.4 CITY-S	T-ZIP	Clearwater, FL	33764		
TITLE	☐ DELETE 2.1 T		2.1 TITLE				Change	☐ Addition
NAME	22N		2.2 NAME					f
STREET ADDRESS	238		2.3 STREE	T ADDRESS				
CITY-ST-ZIP			2.4 CITY-5	ST-ZIP		•		
TITLE	18 <sub>4</sub>	☐ DELETE	3.1 TITLE				Change	☐ Addition
NAME	٠.		3.2 NAME		•			
STREET ADDRESS			3.3 STREE	TADORESS				
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			· [] Channe	O delibera
TITLE		☐ DELETE	4.1 TITLE				Change	☐ Addition
NAME			4. 2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP		——————————————————————————————————————	4.4 CITY+S	T-ZIP			Change	Addition
TITLE		☐ DELETE	5.1 TITLE				☐ cuaude	
NAME			5.2 NAME	T ADDDESS ==		<del>_</del>		ارد دریه بین
STREET ADDRESS			5.3 STREE	T ADDRESS				-

CITY-ST-ZIP this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 over or trusted in powered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in himsent with all other like empowered. 14. I hereby certify that the information supplied w indicated on this annual report of supplements officer or director of the corporation or the research.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ DELETE

William CD Gregg, III, Pres.

3/8/99 727-443-0622

Change

Addition