Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90030 045 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secre ary of State DIVISION OF CORPORATIONS

DOCUMENT # 639254

1. Corporation Name

SCEARCE, SATCHER & JUNG, P.A.

Principal Flaci	e of Business	Mailing Address								
243 W PARK A	VENUE	243 W PARK AVENUE								
SUITE 200 WINTER PARK	EL 20700	SUITE 200 WINTER APRK FL 32789				DO NOT WRITE IN THIS SPACE				
US PARK	FL 32/09	US				3. Date Incorporated or Qualifed				
00		00				10/01/1979			ļ	
2 Principal P	lace of Business	2a, Mailing Address				4. FEI Number	T	Apı	lied For	
-	lace of Edomese	26				59-1935870	No: Applicable			
Suite, Apt.	# etc	Suite, Apt. #, etc.					\$8.		dditional	
22	m, 616.	27				5. Certifcate of Status Desired	•	ee Re		
City & Stat		City & State				6. Election Campaign Financing	\$5	00	May-Be	
23		28				Trust Fund Contribution			Fees	
Zip	Country	Zip Country			8. This corporation owes the current year	Intangible				
24	25 29		30			Personal Property Tax.				
	9. Name and Address of Curre		100			10. Name and Address of New Register	ed Agent			
		<u> </u>		81	Name					
SCE	arce, Kënneth L.						· ———			
243	W PARK AVENUE			82	Street Add	dress (P.O. Box Number is Not Acceptable)				
	E 200			83				<i></i>		
WIN	TER APRK FL 32789						-			
				84	City	5	85	Zip C	ode	
44 Durant of	to the provisions of Systians 607 050	2° and 607 1509 Florida Stati	tec the a	hove.	named cor			na its	egistered	
office or r agent. I a	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was at ons of, Section 607,0505, Fl	authorized Iorida Stat	d by t utes.	he corporat	rporation submits this statement for the purpose tion's board of directors. I hereby accept the ap	pointment	as reg	istered	
SIGNATURE	Olever a least an experience of agricultural and	and title if applicable (NO)	E- Pagieteror	Agent	signature reguir	red when reinstating) DATE	- 		·	
Signature, typed or printed name of registered egen and title if applicable (NOTE: Re 12. OFFICERS ANI) DIRECTORS				13.		ADDITIONS/CHANGES TO OFFICERS		ECTO	RS IN 12	
TITLE	DP STREET	DELETE	1.1 TI	TLE			□ Ch		Addition	
NAME	SCEARCE, KENNTH L.	_	12N/	AME						
STREET ADDRESS			1.3 STRE		ADDRESS					
	WINTER PARK FL			ITY-ST-						
CITY-ST-ZIP	DS	☐ DELETE	2.1 Ti		-217		Cr	ange	Addition	
TITLE	1		2.2 N				_	ŭ	_ (
NAME	454 1850000 50	or more in a			ADDDECC					
STREET ADDRESS			2.3 STREE							
CITY-ST-ZIP	WINTER PARK, Fl. 00000	☐ DELETE		TITY-ST	- ZIP			anne	Addition	
TITLE	DSV	□ percie	3,1 Ti		ŀ					
NAME	SATCHER, DAVID A		3.2 N							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP	WINTER PARK FL	C) DELETE		TY-ST	- ZIP			ange	Addition	
TITLE		C DEFEIF	4.1 Ti		Ì			unge		
NAME			4. 2 N							
STREET ADORE 3S					ADDRESS					
CITY-ST-ZIP				ITY-ST-	ZIP .				- Addition	
TITLE		☐ DELETE	5.1 TI					ianye	☐ Addition)	
NAME			5.2 N		1000565				İ	
STREET ADDRESS			- 1		ADDRESS					
CITY-ST-ZIP				TY-ST-	-ZIP					
TITLE		☐ DELETE	6.1 TI				☐ Ch	nange	Addition	
NAME			6.2 N							
STREET ADDRESS			6.3 S	TREET	ADDRESS					

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 a lighter like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

CR2E034 (11/98