Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90099 011 \*\*\*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

DOCU	MENT # 659889	)						,
r. Corporatio	on Name	,						
H. CAHL	L WARREN, P.A.							
ı								
Principal Plac	ce of Business	Mailing Address				<b>a</b> h a <b>a</b> kin inii dank	l Blekt Glüh ükekt	
•		_						
		359 W DEARBORN ST PO BOX 1207						
		ENGLEWOOD FL 34295-820			DO NOT V	VRITE IN TH	IS SPACE	
					3. Date Incorporated or Quali	fed		
2. Principal F	Place of Business	2a. Mailing Address			03/20/1980 4. FEI Number		l l Ar	lind time
21	ide of publicas	26			59-1982669 -		<del></del>	oplied For ot Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.					\$8.75	<u>'''</u>
22		27			5. Certifcate of Status Desired	<del>.</del> 🗆	•	equired
City & Stat	te	City & State			6. Election Campaign Financi	na 🗆	\$5.00	May Be
23		28			Trust Fund Contribution	a 🗆		to Fees
Zip	Country	Zip	Country		8. This corporation owes the	current year li	ntangible	
24	25		30		Personal Property Tax.		Yes	□No
	9. Name and Address of Curren	nt Registered Agent	04	1 11	10. Name and Address of Ne	w Registered	d Agent	
WAR	rren, earl r		81	Name			•	
	W DEARBORN ST		82	Street Addr	ress (P.O. Box Number is Not Acco	eptable)		-
	ELEWOOD, FL		83					
3422	· · · · · · · · · · · · · · · · · · ·		"					
			84	City		FI	85 Zip	Code
11 Pursuant	to the provisions of Sections 607 050	12 and 807 1508 Florida Statute	ac the shove	namad com	eration submits this statement for		- Sabanaina ita	-agistared
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State	of Florida. Such change was at	uthorized by t	the corporation	poration submits this statement for on's board of directors. I hereby ac	the purpose o	of changing its of intment as re	registered gistered
office or n agent. I a	registered agent, or both, in the State am familiar with, and accept the obligat	of Florida. Such change was at	uthorized by t	the corporation	poration submits this statement for on's board of directors. I hereby ac	the purpose o	of changing its ointment as re	registered gistered
office or r	registered agent, or both, in the State am familiar with, and accept the obligat	of Florida. Such change was au ations of, Section 607.0505, Flor	uthorized by t rida Statutes.	the corporation.	poration submits this statement for on's board of directors. I hereby ac	the purpose o	of changing its printment as re	registered gistered
office or n agent. I a	registered agent, or both, in the State am familiar with, and accept the obligation Signature, typed or printed name of registered agen OFFICERS AN	of Florida. Such change was au ations of, Section 607.0505, Flor	uthorized by t rida Statutes.	the corporation.	on's board of directors. I hereby ac	the purpose of copt the appointment	ointment as re	gistered
office or n agent. I a SIGNATURE	registered agent, or both, in the State- am familiar with, and accept the obligation of the obligation	of Florida. Such change was at ations of, Section 607.0505, Florent and little if applicable. (NOTE:	uthorized by trida Statutes. Registered Agent	the corporation.	on's board of directors. I hereby ac	the purpose of copt the appointment	ointment as re	gistered
office or nagent. I a SIGNATURE 12.	registered agent, or both, in the State am familiar with, and accept the obligar Signature, typed or printed name of registered agen OFFICERS AN PD WARREN, R. EARL	of Florida. Such change was at ations of, Section 607.0505, Florint and little if applicable.  (NOTE: ND DIRECTORS	uthorized by trida Statutes. Registered Agent	the corporation.	on's board of directors. I hereby ac	the purpose of copt the appointment	ointment as re	gistered  ORS IN 12
office or ragent. I a SIGNATURE  12.	registered agent, or both, in the State am familiar with, and accept the obligar Signature, typed or printed name of registered agen OFFICERS AN PD WARREN, R. EARL 1063 KEYWAY ROAD	of Florida. Such change was at ations of, Section 607.0505, Florint and little if applicable.  (NOTE: ND DIRECTORS	Registered Agent  13.	the corporation	on's board of directors. I hereby ac	the purpose of copt the appointment	ointment as re	gistered  ORS IN 12
office or ragent. I a SIGNATURE  12. TITLE NAME	registered agent, or both, in the State am familiar with, and accept the obligation of the obligation	of Florida. Such change was at ations of, Section 607.0505, Florint and little if applicable.  (NOTE: ND DIRECTORS	uthorized by trida Statutes.  Registered Agent  13.  1.1 TITLE  1.2 NAME	the corporation	on's board of directors. I hereby ac	the purpose of copt the appointment	ointment as re	gistered  ORS IN 12
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligated agent of printed name of registered agent of PD WARREN, R. EARL 1063 KEYWAY ROAD ENGLEWOOD FL	of Florida. Such change was at ations of, Section 607.0505, Florint and little if applicable.  (NOTE: ND DIRECTORS	uthorized by trida Statutes.  Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET	the corporation	on's board of directors. I hereby ac	the purpose of copt the appointment	ointment as re	gistered  ORS IN 12
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the obligated agent of printed name of registered agent of PD WARREN, R. EARL 1063 KEYWAY ROAD ENGLEWOOD FL S WARREN, SYLVIA E.	of Florida. Such change was an ations of, Section 607.0505, Florint and title if applicable. (NOTE:  ND DIRECTORS	rida Statutes.  Registered Agent  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-ST	the corporation	on's board of directors. I hereby ac	the purpose of copt the appointment	ointment as re	ORS IN 12
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State arm familiar with, and accept the obligated agent of the obligated agent o	of Florida. Such change was an ations of, Section 607.0505, Florint and title if applicable. (NOTE:  ND DIRECTORS	uthorized by a rida Statutes.  Registered Agent  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-ST  2.1 TITLE	t signature require	on's board of directors. I hereby ac	the purpose of copt the appointment	ointment as re	ORS IN 12
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the obligated agent of printed name of registered agent of PD WARREN, R. EARL 1063 KEYWAY ROAD ENGLEWOOD FL S WARREN, SYLVIA E.	of Florida. Such change was an ations of, Section 607.0505, Floring and little if applicable. (NOTE:  ND DIRECTORS  DELETE	uthorized by a rida Statutes.  Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME	t signature require  ADDRESS  ADDRESS	on's board of directors. I hereby ac	the purpose of copt the appointment	ointment as re	ORS IN 12 Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	registered agent, or both, in the State arm familiar with, and accept the obligated agent of the obligated agent o	of Florida. Such change was an ations of, Section 607.0505, Florint and title if applicable. (NOTE:  ND DIRECTORS	uthorized by a rida Statutes.  Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET.	t signature require  ADDRESS  ADDRESS	on's board of directors. I hereby ac	the purpose of copt the appointment	ointment as re	ORS IN 12
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State arm familiar with, and accept the obligated agent of the obligated agent o	of Florida. Such change was an ations of, Section 607.0505, Floring and little if applicable. (NOTE:  ND DIRECTORS  DELETE	rida Statutes.  Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-ST 2.4 CITY-ST	t signature require  ADDRESS  ADDRESS	on's board of directors. I hereby ac	the purpose of copt the appointment	intment as re	ORS IN 12 Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	registered agent, or both, in the State arm familiar with, and accept the obligated agent of the obligated agent o	of Florida. Such change was an ations of, Section 607.0505, Floring and little if applicable. (NOTE:  ND DIRECTORS  DELETE	uthorized by a rida Statutes.  Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET. 2.4 CITY-ST 3.1 TITLE	ADDRESS ADDRESS T-ZIP	on's board of directors. I hereby ac	the purpose of copt the appointment	intment as re	ORS IN 12 Addition
Office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State arm familiar with, and accept the obligated agent of the obligated agent o	of Florida. Such change was autions of, Section 607.0505, Florida ditions of, Section 607.0505, Florida ditions of applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE	uthorized by a rida Statutes.  Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-ST 3.4 CITY-ST 3.4 CITY-ST	ADDRESS ADDRESS T-ZIP ADDRESS	on's board of directors. I hereby ac	the purpose of copt the appointment	intment as re	ORS IN 12 Addition Addition
Office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE	registered agent, or both, in the State arm familiar with, and accept the obligated agent of the obligated agent o	of Florida. Such change was an ations of, Section 607.0505, Floring and little if applicable. (NOTE:  ND DIRECTORS  DELETE	uthorized by a rida Statutes.  Registered Agent  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-ST  2.1 TITLE  2.2 NAME  2.3 STREET  3.1 TITLE  3.2 NAME  3.3 STREET  4.1 TITLE  4.1 TITLE	ADDRESS ADDRESS T-ZIP ADDRESS	on's board of directors. I hereby ac	the purpose of copt the appointment	intment as re	ORS IN 12 Addition
Office or ragent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State arm familiar with, and accept the obligated agent of the obligated agent o	of Florida. Such change was autions of, Section 607.0505, Florida ditions of, Section 607.0505, Florida ditions of applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE	uthorized by a rida Statutes.  Registered Agent  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-ST  2.1 TITLE  2.2 NAME  2.3 STREET  3.1 TITLE  3.2 NAME  3.3 STREET  4.1 TITLE  4.2 NAME	ADDRESSZIP ADDRESSZIP ADDRESSZIP	on's board of directors. I hereby ac	the purpose of copt the appointment	intment as re	ORS IN 12 Addition Addition
Office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State arm familiar with, and accept the obligated agent of the obligated agent o	of Florida. Such change was autions of, Section 607.0505, Florida ditions of, Section 607.0505, Florida ditions of applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE	uthorized by a rida Statutes.  Registered Agent  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-ST  2.1 TITLE  2.2 NAME  2.3 STREET.  2.4 CITY-ST  3.1 TITLE  3.2 NAME  3.3 STREET.  4.1 TITLE  4.2 NAME  4.3 STREET.	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS	on's board of directors. I hereby ac	the purpose of copt the appointment	intment as re	ORS IN 12 Addition Addition
Office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State arm familiar with, and accept the obligated agent of the obligated agent o	of Florida. Such change was an ations of, Section 607.0505, Floring and little if applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE  DELETE	uthorized by a rida Statules.  Registered Agent  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-ST  2.1 TITLE  2.2 NAME  2.3 STREET  3.1 TITLE  3.2 NAME  3.3 STREET  4.1 TITLE  4.2 NAME  4.3 STREET  4.4 CITY-ST  4.4 CITY-ST  4.4 CITY-ST	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS	on's board of directors. I hereby ac	the purpose of copt the appointment	intment as re	ORS IN 12 Addition Addition Addition
Office or ragent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State arm familiar with, and accept the obligated agent of the obligated agent o	of Florida. Such change was autions of, Section 607.0505, Florida ditions of, Section 607.0505, Florida ditions of applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE	uthorized by a rida Statutes.  Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-ST 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-ST 5.1 TITLE	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS	on's board of directors. I hereby ac	the purpose of copt the appointment	intment as re	ORS IN 12 Addition Addition
Office or ragent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State arm familiar with, and accept the obligated agent of the obligated agent o	of Florida. Such change was an ations of, Section 607.0505, Floring and little if applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE  DELETE	uthorized by a rida Statules.  Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-ST 5.1 TITLE 5.2 NAME	ADDRESSZIP  ADDRESSZIP  ADDRESSZIP	on's board of directors. I hereby ac	the purpose of copt the appointment	intment as re	ORS IN 12 Addition Addition Addition
Office or ragent. I a agent. I a signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	registered agent, or both, in the State arm familiar with, and accept the obligated agent of the obligated agent o	of Florida. Such change was an ations of, Section 607.0505, Floring and little if applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE  DELETE	uthorized by a rida Statules.  Registered Agent  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-ST  2.1 TITLE  2.2 NAME  2.3 STREET  3.1 TITLE  3.2 NAME  3.3 STREET  4.1 TITLE  4.2 NAME  4.3 STREET  4.4 CITY-ST  5.1 TITLE  5.2 NAME  5.3 STREET	ADDRESSZIP ADDRESSZIP ADDRESSZIP ADDRESSZIP	on's board of directors. I hereby ac	the purpose of copt the appointment	intment as re	ORS IN 12 Addition Addition Addition
Office or ragent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State arm familiar with, and accept the obligated agent of the obligated agent o	of Florida. Such change was an ations of, Section 607.0505, Florint and little if applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE  DELETE	uthorized by a rida Statules.  Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET. 3.1 TITLE 3.2 NAME 3.3 STREET. 4.1 TITLE 4.2 NAME 4.3 STREET. 5.1 TITLE 5.2 NAME 5.3 STREET. 5.1 TITLE 5.2 NAME 5.3 STREET. 5.4 CITY-ST 5.4 CITY-ST 5.4 CITY-ST 5.5 STREET. 5.4 CITY-ST 5.5 CITY-	ADDRESSZIP ADDRESSZIP ADDRESSZIP ADDRESSZIP	on's board of directors. I hereby ac	the purpose of copt the appointment	intment as re  ND DIRECTO Change Change Change	Gistered  ORS IN 12 Addition  Addition  Addition  Addition
Office or ragent. I a agent. I a signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	registered agent, or both, in the State arm familiar with, and accept the obligated agent of the obligated agent o	of Florida. Such change was an ations of, Section 607.0505, Floring and little if applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE  DELETE	uthorized by a rida Statules.  Registered Agent  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-ST  2.1 TITLE  2.2 NAME  2.3 STREET  3.1 TITLE  3.2 NAME  3.3 STREET  4.1 TITLE  4.2 NAME  4.3 STREET  4.4 CITY-ST  5.1 TITLE  5.2 NAME  5.3 STREET	ADDRESSZIP ADDRESSZIP ADDRESSZIP ADDRESSZIP	on's board of directors. I hereby ac	the purpose of copt the appointment	intment as re	Gistered  ORS IN 12 Addition Addition Addition

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 all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

DATE DATE WARREN, P. A 2/2/99 941-4747768