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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 667027

Principal Place of Business

R3 CORPORATION OF TYSON SUBDIVISION

5812 16TH ST. ZEPHYRHILLS F US	EL 33540	5812 16TH ST. ZEPHYRHILLS FL 33540 US	EPHYRHILLS FL 33540			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 04(17/1090)			
						04/17/1980			
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number		pplied For ot Applicable	
21		26				59-2001072		Additional	
Suite, Apt. a	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	•	equired	
City & State City & State						6. Election Campaign Financing Trust Fund Contribution			
Zip 24	Country 25	Zip Cour 30				8. This corporation owes the current year Intangible Personal Property Tax. ☑ Yes □ No			
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered A	gent		
			1	31	Name				
SPRUNGER TYSON, JOYCE				82 Street Address (P.O. Box Number is Not Acceptable)					
5812 16TH ST. ZEPHYRHILLS FL 33540				33					
			L		Ciby		85 Zip	Code	
			- 1		City	FL_	'		
office or re agent. I as	egistered agent, or both, in the State on the interest and accept the obligation of the colligation of the collins of the col	of Florida. Such change was autions of, Section 607.0505, Florid	norizeo la Statut	es.	ne corporati	poration submits this statement for the purpose of clon's board of directors. I hereby accept the appoint advenue of the statement of the purpose of clon's board of directors.	ment as r	egistered	
A PARTIE AND DIPPORTED AND ADDRESS OF THE PARTIES AND ADDRESS OF THE PARTIE					aignatoro rodone	ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12	
12.		D DIRECTORS DELETE	13.	F			☐ Change	Addition	
TITLE	VDS	□ becele			1	,			
NAME	SPRUNGER TYSON, JOYCE		1.2 NAM						
STREET ADDRESS	5812 16TH ST.				ADDRESS				
CITY-ST-ZIP	ZEPHYRHILLS FL		1.4 CITY		-ZIP	<u> </u>	Change	Addition	
TITLE	- 1		2.1 TITL		1		Criange	L) Addition	
NAME	TYSON, DUWAYNE R.		2.2 NAM	Æ					
STREET ADDRESS	6134 7TH ST.		2.3 STREET ADDRESS		ADDRESS			-	
CITY-ST-ZIP	ZEPHYRHILLS FL		2.4 CIT	2.4 CITY-ST-ZIP					
TITLE	☐ DELETE		3.1 TITL	E		`	Change	☐ Addition	
NAME			3.2 NAM	Æ				J	
STREET ADDRESS			3.3 STR	EET A	ADDRESS			ļ	
CITY-ST-ZIP			3.4. CIT	Y-ST	-ZIP				
TITLE		☐ DELETE	4.1 TITU	E			☐ Change	☐ Addition	
NAME			4 2 NA	ME				{	
STREET ADDRESS			4.3 STR	EET	ADDRESS			1	
CITY-ST-ZIP			4.4 CIT		- 1			\	
TITLE		☐ DELETE	5.1 TITL				☐ Change	☐ Addition	
NAME			5.2 NAM	Æ		1			
STREET ADDRESS			5.3 STR	EET	ADDRESS				
			5.4 CIT						
CITY-ST-ZIP TITLE		DELETE	6.1 TITL				☐ Change	Addition	
NAME		<u></u>	6.2 NAM	Æ			-		
					ADDRESS			}	
STREET ADDRESS			64 CIT		!				
CITY_ST.ZIP	İ		04 011	3 , "					

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.

813·782·2981

FILED

Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90089 041 ***150.00

CR2E034 (11/98)