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Secretary of State

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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 717377

1. Corporation Name

ALCO-HALL, INC.

Principal Place of Business

1215 LAKE DRIVE  
COCOA FL 32922

Mailing Address

1215 LAKE DRIVE  
COCOA FL 32922



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

10/16/1969

4. FEI Number

23-7061960

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MELTON, JONATHAN  
1215 LAKE DR  
COCOA FL 32922

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

P  
CORYE, MICHAEL L  
4800 TOKAY ST  
COCOA FL 32926

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D  
IVEY, JUDY  
275 EAGLE LANE  
MERRITT ISLAND FL

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

ST  
ELLIS, STEVE  
535 DELANNOY AVE.  
COCOA FL

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D  
PATRICK, KENNY  
5493 FLINT RD.  
COCOA FL

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D  
MELTON, JONATHAN  
5540 FAN PALM AVE.  
COCOA FL

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D  
VAN LEAR, JOHN  
36 CARLTON AVE  
COCOA FL 32922

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

Change  Addition

Change  Addition

Change  Addition

Change  Addition

Change  Addition

Change  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 617, 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.

SIGNATURE:

*Jonathan Melton* Jonathan Melton 1/24/99 407 632 5958

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/198)