Mar 25, 1999 8:00 am Secretary of State

03-25-1999 90060 007 ***150.00

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Mailing Address

2201 CANTU CT

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F05937

1. Corporation Name

Principal Place of Business

2201 CANTU CT

J. M. STEWART, CORPORATION

| STE 217 | • | STE 217 | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------|
| SARASOTA FL | 34232 | SARASOTA FL 34232 | | DO NOT WRITE IN THIS | SSPACE | |
| US | | US | | 3. Date Incorporated or Qualifed | |] |
| | | • | | 11/18/1980 | | |
| 2. Principal Pl | lace of Business | 2a. Mailing Address | | 4. FEI Number | Α | opplied For |
| 21 | | 26 5029 Edgewat | ter Drive | 59-2035829 | N | lot Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | , | Additional |
| 22 | | 27 | | | - Fee F | Required · |
| City & State | e | City & State | | 6. Election Campaign Financing | • | May Be |
| 23 | | Orlando, FL | | Trust Fund Contribution | Added | to Fees |
| Zip | Country | Zip | Country | 8. This corporation owes the current year In | | |
| 24 | 25 | 29 32810 30 | | Personal Property Tax. | Yes | XXNo |
| Name and Address of Current Registered Agent | | | 10. Name and Address of New Registered Agent | | | |
| _ | | | 81 Name | Harris Marshall C | | 1 |
| STEWART, J. MELVIN | | | 82 Street | Harris, Marshall S. | | · |
| 2201 | CANTU CT | | OZ Sueet/ | Address (P.O. Box Number is Not Acceptable) 5029 Edgewater Drive | | |
| STE | 217 | | 83 | | | |
| SARA | ASOTA FL 34232 | | | | | |
| | | | 84 City | Orlando F I | | Code 2810 |
| 11 Pursuant | to the provisions of Sections 607.0502 | and 607.1508. Florida Statutes. | the above-named | corporation submits this statement for the purpose of | f changing ì | ts registered |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. | | | | | | |
| agent. I ar | | ons of, Section 607.0505, Florida | arshall S. | Harris 3/18/9 | 9 | |
| SIGNATURE / AN WALL OF Four Plans I and I registered agent and yet if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE | | | | | | |
| | | | | | | |
| 12 | | | | | ND DIRECT | ORS IN 12 |
| 12. | OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFFICERS A | ND DIRECT | |
| TITLE | OFFICERS AND | DIRECTORS | 13. 1.1 TITLE | ADDITIONS/CHANGES TO OFFICERS A | | |
| TITLE | OFFICERS AND D STEWART, MELVIN J | DIRECTORS | 13. 1.1 TITLE 1.2 NAME | ADDITIONS/CHANGES TO OFFICERS A P/D Stewart, J. Melvin | Change | |
| TITLE NAME STREET ADDRESS | OFFICERS AND D STEWART, MELVIN J 3949 GLEN OAKS MANOR DR | DIRECTORS | 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS | P/D Stewart, J. Melvin 2201 Cantu Court, Suite 21 | Change | |
| TITLE NAME STREET ADDRESS CITY-ST-Z!P | OFFICERS AND D STEWART, MELVIN J 3949 GLEN OAKS MANOR DR SARASOTA, FL 00000 | D DIRECTORS | 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY- ST- ZIP | ADDITIONS/CHANGES TO OFFICERS A P/D Stewart, J. Melvin 2201 Cantu Court, Suite 217 Sarasota, FL 34232 | ☆ Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | OFFICERS AND D STEWART, MELVIN J 3949 GLEN OAKS MANOR DR SARASOTA, FL 00000 VPS | DIRECTORS | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE | ADDITIONS/CHANGES TO OFFICERS A P/D Stewart, J. Melvin 2201 Cantu Court, Suite 217 Sarasota, FL 34232 V | Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | OFFICERS AND D STEWART, MELVIN J 3949 GLEN OAKS MANOR DR SARASOTA, FL 00000 VPS SCHAETZEL, PAMELA | D DIRECTORS | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME | P/D Stewart, J. Melvin 2201 Cantu Court, Suite 217 Sarasota, FL 34232 V Schaetzel, Pamela | Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | OFFICERS AND D STEWART, MELVIN J 3949 GLEN OAKS MANOR DR SARASOTA, FL 00000 VPS SCHAETZEL, PAMELA 2201 CANTU CT STE 217 | D DIRECTORS | 13. 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 | P/D Stewart, J. Melvin 2201 Cantu Court, Suite 217 Sarasota, FL 34232 V Schaetzel, Pamela 2201 Cantu Court, Suite 217 | Change | Addition |
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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.

6.3 STREET ADDRESS

STREET ADDRESS