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PROFIT CORPORATION ANNUAL REPORT 1999			FLORIDA DEPARTMENT OF STATE  Katherine Harris  Secretary of State  DIVISION OF CORPORATIONS							
DOCUMENT # F32956  1. Corporation Name GARDNER, SHELFER, DUGGAR & BIST, P.A.							99 JUL -9 PM 2: 30			
GALIDIAL	., once en, podd	AI G DIOI, F	·r·				emena :			
Principal Place of Business Mailing Address								*		
1300 THOMASWOOD DRIVE 1300 THOMASWOOD DRIVE										
TALLAHASSEE FL 32312 TALLAHASSEE FL 32312							DO NOT WRITE IN THIS SPACE			
							3. Date incorporated or Q 05/01/1981	uslifed		
2. Principal P	tace of Business	2a.	Mailing Address		<del></del>		4. FEI Number		I An	plied For
21			26				<u>59-2088596</u>		<del></del>	t Applicable
Sulte, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status De	sired 🔲	\$8.75 / Fee Re	
City & State			City & State				6. Election Campaign Fin.		\$5.00	
Zip Country			Zip Country				8. This corporation owes		Added to	o Fees
25			29 30				Personal Property Tax	<u> </u>	<b>™</b> Yes	□No
	9. Name and Address o	f Current Registe	red Ageni		B1 Name		10. Name and Address o	Hew Regist	ered Agent	
GARDNER, CHARLES R.						Addros	s (P.O. Box Number is Not	A nagatable t		
1300 THOMASWOOD DHIVE						ACCUPATION	is (P.O. BOX NUMBER IS NOT	Acceptable)		
TALL	LAHASSEE FL 32312			ľ	83				•	
				į.	84 City			· · · · · · · · · · · · · · · · · · ·	FL 85 Zip (	Code
11. Pursuant	to the provisions of Sections	607.0502 and 60	7.1508, Florida Statutes.	, the ab	Dve-named	Corpor	ation submits this statement	for the purpo		registered
office or n agent. i a	to the provisions of Sections egistered agent, or both, in the m familiar with, and accept the model of the provision of the provisions of th	ne State of Florida ne obligations of, !	Such change was auth section 607.0505, Florid	horized l le Statut	by the corp	oration	's board of directors. I hereb	y accept the	appointment as re	gistered
SIGNATURE								- 63		\
12.	Bignature, typed or printed name of reg OFFIC	ERS AND DIREC		13.	Gent industria	undrama a	Ann reinstating) ADDITIONS/CHANGES			RS IN 12
TITLE	VD		☐ DELETE	1.1 TML	E	BR	LCE I. WITHER	'A	☐ Change	Addition
HAME	SHELFER, JAMES O	SHELFER, JAMES O		1.2 NAM			DOOWZAMANT OC	1.1		
STREET ADDRESS	1300 THOMASWOOD DRIVE		1.3 STREET ADDRESS		TA	liahassee, Flor	da 323	312-		
CITY-ST-ZIP TITLE	TALLAHASSEE, FL 00000			1.4 CITY-ST-ZIP 21 TITLE		<b>├</b> ──			☐ Change	Addition
NAME	GARDNER, CHARLES F	1	22 NAA						Comp	
STREET ADDRESS 1300 THOMASWOOD DRIVE			23 5776				• •			•
CITY-\$T-ZIP	TALLAHASSEE, FL 00000			2 4 CITY-ST-ZIP						
TTLE	\$TD DELETE		31 TIFLE					☐ Change	Addition	
NAME	DUGGAR, ELAINE N s 1300 THOMASWOOD DRIVE			32 NAME 3.3 STREET ADDRESS		į				ļ
STREET ADORESS CITY-ST-ZIP	TALLAHASSEE, FL 000									
TITLE	VD DELETE		34.CITY-ST-ZIP 4.1 TITLE		<del>                                     </del>			Change	Addition	
NAME	BIST, MICHAEL P.		4.2 NAME		ŀ	•			1	
STREET ADDRESS	1300 THOMASWOOD D	<b>PR</b>			EET ADDRESS					- 1
CFTY-ST-ZIP	TALLAHASSEE FL		Document		-\$T-ZIP	ļ				- Dadition
TITLE NAME			☐ OELETE	61 TITL 62 NAM	_				Change	☐ Addition
STREET ADDRESS				8	EET ADDRESS					
CITY-SY-ZIP				5.4 CITY						
TITLE			☐ DELETE	6.1 TITU					Change	Addition
NAME			į	6.2 NAM		[	•			
STREET ADDRESS				63 STR	EET ADDRESS		* 1 TS	•		
***TV. D1 780 4					-01-45		, , <b>=</b> =	_		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3(ii), Fidrida Statutes. I further certify that the informati indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal affect as If made under oath; that I am an officer or director of the corporation or the receiver or trustes empowered to execute this report as required by Chapter 607, Fiorida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Juin D. Aluffer Singes O. Sheller 1/29/99 550-385-00

RZE034 (11/98)