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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **F56946**

1. Corporation Name

ONE N. NOVA ROAD, INC.

Principal Place of Business Mailing Address					((BDiiBD 1) Or Olivia divin vibili urusin urivi arass	TIBIL BIBLI BIBLI BI	E(6101(10E)
1030 W. INTERNATIONAL SPEEDWAY BLVD. SUITE-240 100		1030 W. International Speedway Blvd. Suite 240 1 <i>00</i> Daytona Beach Fl 32114-3415		DO NOT WRITE IN THI	S SPACE		
DATIONA BEAC	CH FL 32114-3415	DATIONA BEACH FL 32114-34	DATIONA SERON TE SETTEMENTS		3. Date Incorporated or Qualifed 12/03/1981		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Apr	plied For	
21		26		59-2012603		t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A Fee Red		
City & State		City & State		6. Election Campaign Financing	\$5.00		
23		28		Trust Fund Contribution	Added to	o Fees	
Zip	Country	Zip	Countr	у	8. This corporation owes the current year In		□No
24	25	29 30	<u>) </u>		Personal Property Tax. 10. Name and Address of New Registered		
	9. Name and Address of Curre	nt Registered Agent	8.	I Name	10. Name and Address of New Registered	1 Agent	
SCHECTER, RANDAL L.							
1030 W. INT'L SPOWY BLVD			82	2 Street Add	dress (P.O. Box Number is Not Acceptable)		
SUITE 200 100			83	3	<u> </u>		
DAYTONA BEACH FL 32114							
			84	1	poration submits this statement for the purpose of		
agent. I a	m familiar with, and accept the obligation of th	antions of, Section 607.0505, Florida	a Statute	s.	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PST OFFICERS AI	AND DIRECTORS 13.		T	ADDITIONS/CHANGES TO SITTELEND P	☐ Change	Addition
NAME	RHODEN, LARRY L.	C, bellin	1.2 NAME			_ ,	
STREET ADDRESS	913 PINEAPPLE RD		H	ET ADDRESS			
CITY-ST-ZIP	DAYTONA BCH. FL		1.4 CITY-		•		,
TITLE	D	DELETE 2.1 TI				Change	Addition
NAME	RHODEN, LAWTIS DAVID			:			}
STREET ADDRESS	913 PINEAPPLE RD	2.3 ST		ET ADDRESS			
. CITY-ST-ZIP	DAYTONA BCH. FL	2.4C		ST-ZIP			
πιε		DELETE 3.1 TO				☐ Change	Addition .
NAME			3.2 NAME	• 1			
STREET ADDRESS				ET ADORESS			
CITY-ST-ZIP			3.4. CiTY-			Change	Addition
TITLE		☐ DELETE	4.1 TTLE			[_] Citalige	C) Addition
NAME	<u> </u>		4. 2 NAMI				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		☐ DELETE	4.4 CITY- 5.1 TITLE			Change	Addition
NAME		<u> </u>	5.2 NAME				
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME	:			ĺ

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 arachment with an address with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS