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

PROFIT
CORPORATION
ANNUAL REPORT
1999

**PLANTATION FL 33324** 



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

Secretary of State 02-23-1999 90017 032 \*\*\*150.00

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualifed

02/22/1995

FILED Feb 23, 1999 8:00 am

## DOCUMENT # F9500000880

Corporation Name

FREEMAN WEBB COMPANY, REALTORS

Principal Place of Business	Mailing Address
545 Mainstream dr., #101 Nashville tn 37228	545 MAINSTREAM DR., #101 NASHVILLE TN 37228
Principal Place of Business	2a. Mailing Address

4. FEI Number Applied For 62-1060236 Not Applicable Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 Country Zip Country Zip 8. This corporation owes the current year Intangible ☐ Yes □ No 30 Personal Property Tax. 29 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 82 Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND RD.

83

84 City FL 85 Zip Code

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 a subtropy of the corporation's board of directors. I hereby accept the appointment as registered stated and the composition of the corporation of the

адопі. та	m lamiliar with, and accept the obligations of, Section	1 607.0303, FIORG	a Statutes.			
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	e (NOTF: R	egistered Agent signature	required when reinstating) DATE		i
12.	OFFICERS AND DIRECTORS	*	<b>1</b> 3.	ADDITIONS/CHANGES TO, OFFICERS	AND DIRECTO	
TITLE	V	DELETE	1.1 TITLE	PDC	Change	Addition
NAME	KNIGHT, DAVID M	<b>/</b> \	1.2 NAME	WILLIAM H. FREEMAN		
STREET ADDRESS	545 MAINSTREAM DR., #101		1.3 STREET ADDRESS	545 MAINSTREAM DRIVE, SUI	TE 101	
CITY-ST-ZIP	NASHVILLE TN 37228		1.4 CITY+ST+ZIP	NASHVILLE TN 37229	3 .	,
IITLE	VSDQ	☐ DELETE	2.1 TITLE	V	☐ Change	<b>✓</b> Addition
NAME	WEBB, JAMES A III		2.2 NAME	VEGI HICKEY		
STREET ADORESS	545 MAINSTREAM DR., #101		2.3 STREET ADORESS	KEEL HICKEY SYS MAINSTREAM DRIVE, S	UNDE 101	
CITY-ST-ZIP	NASHVILLE TN 37228		2.4 CITY-ST-ZIP	NASHVILLE TN 37228		
TITLE	V	☐ DELETE	3.1 TITLE	111272	☐ Change	Addition
NAME	PYBURN, JACK	_	3.2 NAME			i
STREET ADDRESS	545 MAINSTREAM DR., #101		3.3 STREET ADDRESS			,
	NASHVILLE TN 37228		34 CITY-ST-ZIP			
CITY-ST-ZIP TITLE	MAGNATULE 114 3/220	☐ DELETE	4.1 TITLE		Change	Addition
NAME			4.2 NAME		_ ,	_
			4.2 NAME  4.3 STREET ADDRESS			
STREET ADDRESS						
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		[ ] Change	Addition
TITLE		☐ DECE IE	5.1 HILE 5.2 NAME		[] Orlange	
NAME			5.3 STREET ADDRESS			•
STREET ADDRESS			1			
CITY-ST-ZIP		□ 65 575	5.4 CITY-ST-ZIP 6.1 TITLE		Change	Addition
TITLE		☐ DELETE			☐ Change	☐ Madition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			

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 ecciver 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(299 (615) 271-2700

R2E034 (11/98)