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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **F96000004083**

Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90043 008 ***150.00

TAYLOR	GARDNER ARCHITECTS	S, INC.			•		 		(188 1811 188)
Principal Place of Business Mailing Address									
65 UNION AVE SUITE 1120 65 UNION AVE SUITE 1120 MEMPHIS TN 38103 MEMPHIS TN 38103							DO NOT WRITE IN T	HIS SPACE	
							3. Date Incorporated or Qualifed		
							08/09/1996		
2. Principal Pl	lace of Business	2a. Mailing Addre	ss				4. FEI Number	App	olied For
21		26					62-0866523		Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A Fee Red	
City & State	e	City & State					6. Election Campaign Financing	\$5.00	May Be
23		28					Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Cor	intry	•		8. This corporation owes the current year	r Intangible	
24	25	25 29 30					Personal Property Tax.		№ No
	9. Name and Address of Cu	irrent Registered Agent		-	1		10. Name and Address of New Registe	red Agent	
	CT IOUN			81	Nam	е			
HURST, JOHN				82	Stree	t Addre	ss (P.O. Box Number is Not Acceptable)		
4815 W. ESTRELLA									
TAMPA FL 33629				83					
				84	City			EL 85 Zip C	ode
SIGNATURE	m familiar with, and accept the o		(NOTE: Registered			e required	when reinstating) DAT ADDITIONS/CHANGES TO OFFICER:		RS IN 12
TITLE	PT	□ D8	LETE 1.1 TI	TLE.				Change	☐ Addition
NAME	TAYLOR, GRANVILLE		1.2 N	AME			·		
STREET ADDRESS	ADDRESS 65 UNION AVE., SUITE 1120			1.3 STREET ADDRESS		s			
CITY-ST-ZIP	MEMPHIS TN 38103		1.4 C	ITY-S	T-ZIP				
TITLE	VS DELETE		ELETE 2.1 TI	2.1 TITLE			•	Change	Addition
NAME	GARDNER, RICHARD		2.2 N	AME				- •	
STREET ADDRESS	65 UNION AVE., SUITE 11	20	2.3 S	TREE	TADDRES	s			
CITY-ST-ZIP	MEMPHIS TN 38103			ITY-S	ST-ZIP				T Addison
TITLE		□ DE	ELETE 3.1 TO	TLE				☐ Change	☐ Addition
NAME			3.2 N	AME					
STREET ADDRESS			3.3 S	TREE	TADDRES	s			1.
CITY-ST-ZIP					ST-ZIP	+		☐ Change	Addition
TITLE		☐ Di	LETE 4,1 TI					∴ Citalige	
NAME			i.	IAME					
STREET ADDRESS					T ADDRES	is			
CITY-ST-ZIP		Пог	4.4 C ELETE 5.1 T		T-ZIP	+		Change	Addition
TITLE			5.1 II					_ 4	
NAME					T ADDRES	s			
STREET ADDRESS					T- ZIP				
CITY-ST-ZIP		in Di	LETE 6.1 To					☐ Change	Addition
TITLE 4, .			6.2 N						_
NAME			+		T ADDRES	ss	•		-
STREET ADDRESS									

CITY-ST-ZIP 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.

SIGNATURE: