

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

FILED  
Mar 31, 1999 8:00 am  
Secretary of State

03-31-1999 90045 046 \*\*\*150.00

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1. Corporation Name

BOND & BOTES OF ORLANDO, P.C.

Principal Place of Business

135 W. CENTRAL BLVD. SUITE 310  
ORLANDO FL 32801

Mailing Address

135 W. CENTRAL BLVD. SUITE 310  
ORLANDO FL 32801

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/22/1997

4. FEI Number

62-1701018

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NEWAY, DOUGLAS W  
135 W. CENTRAL BLVD, SUITE 310  
ORLANDO FL 32801

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE CP  
NAME BOTES, BRADFORD W  
STREET ADDRESS 15 S. 20TH ST, SUITE 1325  
CITY-ST-ZIP BIRMINGHAM AL 35233

TITLE VCVS  
NAME BOND, MARK W  
STREET ADDRESS 15 S. 20TH ST, SUITE 1325  
CITY-ST-ZIP BIRMINGHAM AL 35233

TITLE D  
NAME CARLSON, J. SUZANNE  
STREET ADDRESS 15 S. 20TH ST, SUITE 1325  
CITY-ST-ZIP BIRMINGHAM AL 35233

TITLE D  
NAME SYKSTUS, RONALD C  
STREET ADDRESS 200 CLINTON AVE, SUITE 705  
CITY-ST-ZIP HUNTSVILLE AL 35801

TITLE D  
NAME WETZEL, MELISSA W  
STREET ADDRESS 107 ST. FRANCIS ST, SUITE 1712  
CITY-ST-ZIP MOBILE AL 36602

TITLE DT  
NAME NEWAY, DOUGLAS W  
STREET ADDRESS 135 W. CENTRAL BLVD, SUITE 310  
CITY-ST-ZIP ORLANDO FL 32801

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☒ Addition

1.1 TITLE D  
1.2 NAME JOHN C. LARSEN  
1.3 STREET ADDRESS 2708 TRAILWAY ROAD  
1.4 CITY-ST-ZIP HUNTSVILLE AL 35801

2.1 TITLE D  
2.2 NAME ROBERT D. REESE  
2.3 STREET ADDRESS 15 SOUTH 20TH ST. SUITE 1325  
2.4 CITY-ST-ZIP BIRMINGHAM AL 35233

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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: NEWAY, DOUGLAS W. NEWAY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-8-99

Date

407-999-2242

Daytime Phone #

CR2E034 (11/98)