**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9700006680

1. Corporation Name

SCOTT WATSON & ASSOCIATES, INC.

Principal Place of Business

Mailing Address

100 SECOND AVE. SOUTH. 200-S

100 SECOND AVE. SOUTH. 200-S

## **FILED** May 06, 1999 8:00 am Secretary of State

05-06-1999 90191 040 \*\*\*150.00



Solite, Apl. if, etc.	2. Principal Place of Business 21 20 7	DO NOT WRITE IN THIS SPACE
2. Principal Place of Business   2. Applied For   2. Appl	2. Principal Place of Business 2.1 20 Principal Place of Business 2.2 Augliang Address 58-18413 Suite, Apt. #, etc. 2.2 Zulf, Apt. #, etc. 2.2 Zulf, Apt. #, etc. 2.3 Zulf, Apt. #, etc. 2.3 Zulf, Apt. #, etc. 2.5 Zulf, Apt. #, etc. 2.6 Zulf, Apt. #, etc. 2.7 Zulf, Apt. #, etc. 2.7 Zulf, Apt. #, etc. 2.8 Zulf, Apt. #, etc. 2.7 Zulf, Apt. #, etc. 2.8 Zulf, Apt. #, etc. 2.7 Zulf, Apt. #, etc	orated or Qualifed
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100 SECOND AVE. SOUTH, 200-S ST. PETERSBURG FL 33701  83  84 City PETERSBURG FL 33702  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 occuparation's board of directors. I hereby accept the appointment as registered agent, and manufactures, and agenct, lam familiar with, and groups the objection for 0,0505, Florida Statutes.  SIGNATURE	ST. PETERSBURG FL 33701  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of director agent, I am familipr with, and agreep the obligations of Sections 607.0502, Florida Statutes, the above-named corporation submits this office or registered agent, and agreep the obligations of Sections 607.0505, Florida Statutes, the above-named corporation submits this office or registered agent, and agreep the obligations of Sections 607.0505, Florida Statutes, the above-named corporation submits this office or registered agent agreety the corporation's board of director agreements.  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. TITLE  WATSON, SCOTT  12 NAME  WATSON, SCOTT  12 NAME  13 STREET ADDRESS  CITY-ST-ZIP  TITLE  DVS  WATSON, MARTHA  STREET ADDRESS  CITY-ST-ZIP  TITLE  DVS  AUTY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  DELETE  1 TITLE  NAME  1 STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  1 DELETE  1 TITLE  NAME  1 STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  1 STREET ADDRESS  STREET ADDRESS	9750~
ST. PETERSBURG FL 33701  83  84 CIN PETERSBURG FL 33703  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statuties, 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, and familiary with, and accept the obligations of Section 807.0505. Floridas Statuties.  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IT.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IT.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IT.  TITLE  DP  WATSON, SCOTT  STREET ADDRESS  ST. PETERSBURG FL 33703  14 city 51-22P  ST. PETERSBURG FL 33703  14 city 51-22P  TITLE  DVS  WATSON, MARTHA  22 MAME  STREET ADDRESS  ST. PETERSBURG FL 33703  DELETE  31 TITLE  22 MAME  STREET ADDRESS  ST. PETERSBURG FL 33703  DELETE  31 TITLE  32 MAME  33 STREET ADDRESS  ST. PETERSBURG FL 33703  DELETE  31 TITLE  32 MAME  33 STREET ADDRESS  CITY-ST-22P  TITLE  DELETE  34 city 51-22P  Change  Addition  Addition  Change  Addition  Addition  Change  Addition	ST. PETERSBURG FL 33701  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of director agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/C  TITLE  DP  WATSON, SCOTT  12. NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DVS  WATSON, MARTHA  STREET ADDRESS  CITY-ST-ZIP  TITLE  DVS  WATSON, MARTHA  2047 POINT OVERLOOK DR. NE  21. TITLE  WATSON, MARTHA  22. NAME  23. STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3.1 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.2 NAME  3.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.2 NAME  5.3 STREET ADDRESS  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  DELETE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  TITLE  DELETE  5.5 STREET ADDRESS	nber is Not Acceptable)
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 change list registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and accept the obligations of Section 607.0505, Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registered agent, and accept the obligations of Section 607.0505, Florida Statutes, the above-named corporation is board of directors. Thereby accept the appointment as registered agent, and accept the obligations of Section 607.0505, Florida Statutes, the above-named corporation is board of directors. Thereby accept the appointment as registered agent, and accept the appointment ac	11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of director agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  113. ADDITIONS/C  TITLE  DP  WATSON, SCOTT  12 NAME  STREET ADDRESS  CITY-ST-ZP  ST. PETERSBURG FL 33703  TITLE  DVS  WATSON, MARTHA  STREET ADDRESS  CITY-ST-ZP  ST. PETERSBURG FL 33703  DELETE  1.1 TITLE  DVS  WATSON, MARTHA  22 NAME  STREET ADDRESS  CITY-ST-ZP  TITLE  DELETE  3.1 TITLE  NAME  3.2 NAME  3.3 STREET ADDRESS  CITY-ST-ZP  TITLE  MAME  STREET ADDRESS  CITY-ST-ZP  TITLE  DELETE  4.1 TITLE  MAME  STREET ADDRESS  CITY-ST-ZP  TITLE  DELETE  4.1 TITLE  MAME  STREET ADDRESS  CITY-ST-ZP  TITLE  DELETE  4.1 TITLE  MAME  STREET ADDRESS  CITY-ST-ZP  TITLE  DELETE  5.1 TITLE  DELETE  5.1 TITLE  MAME  STREET ADDRESS  CITY-ST-ZP  TITLE  DELETE  5.1 TITLE  DELETE  5.1 TITLE  DELETE  5.1 TITLE  DELETE  5.1 TITLE  DELETE  5.2 VAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZP  TITLE  DELETE  5.1 TITLE  DELETE  5.1 TITLE  DELETE  5.1 TITLE  DELETE  5.2 VAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZP  TITLE  DELETE  5.1 TITLE  DELETE  5.1 TITLE  DELETE  5.2 VAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZP  TITLE  DELETE  5.3 STREET ADDRESS  5.4 CITY-ST-ZP  TITLE  DELETE  5.4 CITY-ST-ZP  TITLE  DELETE  5.5 TITLE  D	1 BUBALOUP DAIL
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 agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, 1 hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Sections 907.0505, Florida Statutes.  SIGNATURE  Signature, yield or printed name of registered agent and title if application. (NOTE: Registered Agent signature required when revisiting)  DP  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS IN 12. In TITLE  DP  NAME  WATSON, SCOTT  2047 POINT OVERLOOK DR. NE  STREET ADDRESS  CITY-ST-ZIP  DVS  WATSON, MARTHA  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP  DELETE  1.1 TITLE  DELETE  1.2 TITLE  DELETE  1.3 STREET ADDRESS  CITY-ST-ZIP  Change  Addition  DELETE  1.3 STREET ADDRESS  CITY-ST-ZIP  Change  Addition  Addition  Change  Addition	11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of director agent, I am familipr with, and accept the obligations of, Section 697.0505, Florida Statutes.  SIGNATURE  Signature, typed or pricted name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/C  TITLE  DP  MAKE  WATSON, SCOTT  STREET ADDRESS  ST. PETERSBURG FL 33703  TITLE  DVS  WATSON, MARTHA  22 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  32 NAME  32 STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  41 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  42 NAME  43 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  51 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  51 TITLE  STREET ADDRESS  CITY-ST-ZIP  TITLE  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  51 TITLE  STREET ADDRESS  CITY-ST-ZIP  TITLE  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  51 TITLE  STREET ADDRESS  54 CITY-ST-ZIP  TITLE  STREET ADDRESS  CITY-ST-ZIP  TITLE  STREET ADDRESS  STRE	
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Agent. I am familipr with, and accept the obligations of, Section 897,0905, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Juristrum required when rematating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  DP  WATSON, SCOTT  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  ST. PETERSBURG FL 33703  14 CITY-ST-ZIP  TITLE  DVS  WATSON, MARTHA  22 MAME  STREET ADDRESS  ST. PETERSBURG FL 33703  DELETE  31 TITLE  ADDRESS  ST. PETERSBURG FL 33703  DELETE  31 TITLE  NAME  32 STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  DELETE  41 TITLE  ADDRESS  CITY-ST-ZIP  DELETE  41 TITLE  ADDRESS  CITY-ST-ZIP  Change Addition  Addition  AMME  STREET ADDRESS  CITY-ST-ZIP  DELETE  41 TITLE  ADDRESS  CITY-ST-ZIP  Change Addition  ADDRESS  CITY-ST-ZIP  Change Addition  ADDRESS  CITY-ST-ZIP  Change Addition  ADDRESS  CITY-ST-ZIP  TITLE  DELETE  51 TITLE  ADDRESS  CITY-ST-ZIP  Change Addition  ADDRESS  CITY-ST-ZIP  Change Addition  ADDRESS  CITY-ST-ZIP  TITLE  DELETE  51 TITLE  DELETE  51 TITLE  Change Addition  Addition	agent. I am familiar with, and accept the obligations of Section 697.0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  OP  OFFICERS AND DIRECTORS  TITLE  DP  NAME  WATSON, SCOTT  STREET ADDRESS  CITY-ST-ZIP  TITLE  DVS  NAME  WATSON, MARTHA  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  STREET ADDRESS  CITY-ST-ZIP  TITLE  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  STREET ADDRESS  CITY-ST-ZIP  TITLE  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  STREET ADDRESS  STREET	s statement for the purpose of changing its registered ors. I hereby accept the appointment as registered
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STREET ADDRESS)	CITY-ST-ZIP 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: