

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
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90087 049 ***150.00

DOCUMENT # **F98000005964**

1. Corporation Name
MEI OF GEORGIA, INC.

Principal Place of Business

**6414 14TH ST. WEST
BRADENTON FL 34207-5329**

Mailing Address

**6414 14TH ST. WEST
BRADENTON FL 34207-5329**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/27/1998

4. FEI Number

58-2086633

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CLANCY, ROBERT J
6414 14TH ST. WEST
BRADENTON FL 34207-5329**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME **D**
RATNER, RICHARD G
STREET ADDRESS **1863 BOUGAINVILLEA ST.**
CITY-ST-ZIP **SARASOTA FL 34239**

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

NAME **D**
BONGART, EDWARD L
STREET ADDRESS **888 BOULEVARD OF ARTS**
CITY-ST-ZIP **SARASOTA FL 34236**

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME **DCEO**
CLANCY, ROBERT J
STREET ADDRESS **8218 REGENTS COURT**
CITY-ST-ZIP **UNIVERSITY PARK FL 34201**

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME **CFO**
SULLIVAN, DANIEL J
STREET ADDRESS **4128 VIA MIRADA**
CITY-ST-ZIP **SARASOTA FL 34238**

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME **V**
DUNCAN, JOEL
STREET ADDRESS **6023 26TH ST. WEST #199**
CITY-ST-ZIP **BRADENTON FL 34207**

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME **V**
BAILEY, LINDA
STREET ADDRESS **5181 HORSESHOE PLACE NE**
CITY-ST-ZIP **ST. PETERSBURG FL 33703**

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:

[Signature] **SIGNATURE REQUIRED**

4/11/99

(941) 755-4634

CR2E034 (11/98)