Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90043 041 ***150.00

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 # G17100

1. Corporation Name

PRICE & COMPANY, P.A.

						ill 8:0() BIBN 91011 0	(Bit Atall (BB)	
Principal Place of Business Mailing Address								
753 NORTH CITRUS AVENUE PO BOX 2290								
CRYSTAL RIVER FL 34423		CRYSTAL RIVER FL 34423			DO NOT WRITE IN TH	DO NOT WRITE IN THIS SPACE		
US				3. Date Incorporated or Qualified				
					12/30/1982			
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	<u> </u>	olied For	
26			<u></u>		59-2265048		t-Applicable =	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional			
22		27			5. Certificate of Ctatus Desired	Fee Red	quired	
City & State	9	City & State			6. Election Campaign Financing	\$5.00	мау Ве	
23		28			Trust Fund Contribution Added to Fees			
Zip	Zip Country Zip				8. This corporation owes the current year		_	
24	25	29 30	0		Personal Property Tax.		□No	
	9. Name and Address of Current	Registered Agent	81		10. Name and Address of New Register	ed Agent		
				Name			į	
PRICE, PHILIP W.			82	82 Street Address (P.O. Box Number is Not Acceptable)				
753 NORTH CITRUS AVE.			"-	Guodini	idios (i ioi bex italiiba ib i			
CRYSTAL RIVER FL 34428			83					
			84	enth.		85 Zip C	abo.	
				City	F		,oue	
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			-		DATE DATE			
Organizate, types of printed finance organization			pistered Agent signature required when reinstating) DATE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
12.		DELETE	1.1 TITLE		ADDITIONO/OTPATOES TO OTT TOETTO	☐ Change	Addition	
TITLE	PSTD	— perei:	1.2 NAME					
NAME	PRICE, PHILLIP W						ļ	
STREET ADDRESS	700 11011117 0111100 7111			ADDRESS			J	
CITY-ST-ZIP	CRYSTAL RIVER FL	☐ DELETE	1.4 CITY-S	T- ZIP	* * *	- Change	- Addition	
TITLE	VP	. ॄ □ DELETE .	2.1 TITLE		* **			
NAME	PRICE, WILLIAM E.		2.2 NAME		•		ţ	
STREET ADDRESS	3277 U.S. 19TH NORTH		2.3 STREET					
CITY-ST-ZIP	CLEARWATER FL		2. 4 CITY-S	T-ZIP		Change	Addition	
TITLE .	AS ·	☐ DELETE	3.1 TITLE	1		Change	L Addition	
NAME	PRICE, CHARLES E.		3.2 NAME	-	105 S. E 100 5T,			
STREET ADDRESS	844 S.E. 1ST COURT		3.3 STREET ADDRESS		103 3.6 10			
CITY-ST-ZIP	CRYSTAL RIVER FL		3.4. CITY-S	T-ZIP				
TITLE	AT	☐ DELETE	4.1 TITLE			Change	☐ Addition	
NAME	PRICE, LIZ		4.2 NAME		1 / 1 / 2 / 3			
STREET ADDRESS	844-SE-1ST-COURT		4.3 STREET ADDRESS		105 S.E. 1012 ST.		Í	
C/TY-ST-ZIP	CRYSTAL RIVER FL		4.4 CITY-S					
TITLE		DELETE	5.1 TITLE			☐ Change	☐ Addition	

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 chapted, or on an attachment with an address, with all other like empowered.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

DELETE

DELETE

Change

Addition