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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # G18955

4280 CORPORATION

FILED Feb 17, 1999 8:00am **Secretary of State**

02-17-1999 90079 021 ***150.00



						! ! !!! ! .!!! !.! !! !!!		
Principal Place	of Business	Mailing Address			(IESUIT SUB) III III III III III III III III III I			
4280 S WASHINGTON AVE TITUSVILLE FL 32780		4280 S WASHINGTON AVE TITUSVILLE FL 32780		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed			
					01/17/1983 4. FEI Number	TAppl	lied For	
2. Principal Place of Business		2a. Mailing Address			59-2248865		Applicable	7
21		Suite, Apt. #, etc.				\$8.75 Ad		
Suite, Apt. #, etc.					5. Certificate of Status Desired	Fee Req	uired	
22		City & State			6. Election Campaign Financing	\$5.00 N		
City & State		28		Trust Fund Contribution	Added to	Fees		
Zip Country		Zip Country		ry	8. This corporation owes the current year	Intangible	¬	
24	25	25 29 30			Personal Property Tax.		□No	
24	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Register	м Адент		
			8	1 Name				
KENASTON, JAMES H.		82 Stree		2 Street Add	Address (P.O. Box Number is Not Acceptable)			
4280 S. WASHINGTON AVE		83				1178, 53, 170, 18	1,20	
THU	SVILLE FL 32780		ľ	3		古书等等的 12		
			Įε	4 City	Entropy State of Stat	85 Zip C	ode '	
	Wilson Land		on the che	no pamed com	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	of changing its	registered	
11. Pursuant to office or re agent. I ar	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations.	of Florida. Such change was a ations of, Section 607.0505, Flo	uthorized b orida Statut	by the corporations.	poration submits this statement for the pulpose ion's board of directors. I hereby accept the ap	pointment as reg	jistered	
SIGNATURE		NOTE	Registered A	gent signature requir	ed when reinstating) DATE			6
	Signature, typed or printed name of registered age	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		RS IN 12	Š
TITLE	P	☐ DELETE	1.1 TITL	Ē		Change	☐ Addition	3
NAME	KENASTON, JAMES H		1.2 NAM	IE				Š
STREET ADDRESS	4280 S. WASHINGTON AVE		1.3 STR	EET ADDRESS			ļ	Ĺ
CITY-ST-ZIP	TITUSVILLE FL		1.4 CITY	/-ST-ZIP		☐ Change	Addition	ç
TITLE	S	☐ DELETE	2.1 TITL	E		☐ Criange		ì
NAME	KENASTON, JEANNE H		2.2 NAM	AE ·	•			ì
STREET ADDRESS	4280 S. WASHINGTON AVE		2.3 STR	EET ADDRESS				
CITY-ST-ZIP	TITUSVILLE FL			Y-ST-ZIP.		Change	Addition	
TITLE		☐ DELETE	3,1 TITL			_ ,	_	l
NAME			3.2 NA				and the fire	
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP		□ DELETE	3.4. CIT	Y-ST-ZIP		Change	, Addition	ì
TITLE			4. 2 NA					
NAME		,		REET ADDRESS				
STREET ADDRESS				Y-ST-ZIP			,	1
CITY-ST-ZIP		☐ DELETE	5.1 TIT			Change	☐ Addition	
TITLE			5.2 NA	I .	•			Ì
NAME			5.3 STI	REET ADDRESS				1
STREET ADDRESS			5.4 CIT	Y-ST-ZIP				} `
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TIT	LE		☐ Change	☐ Addition	1
NAME			6.2 NA	ME				1
STREET ADDRESS			6.3 ST	REET ADDRESS				1
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP			information]
Ultivalizin	1				Castion 110 07(3)(i) Florida Statutes I furthe	r centry that the	momation	

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 changes for on an attachment with an address, with all other like empowered.

SIGNATURE: