Applied For

Fee Required

\$5.00 May Be

Added to Fees

☐ Yes

Not Applicable \$8.75 Additional

□No

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 # G26356

Principal Place			ailing Address				
HIGHWAY 77, S P.O. BOX 277 CHIPLEY FL 324		P.C	GHWAY 77. SOUTH). BOX 277 IPLEY FL 32428				
							3.
2. Principal Pl	ace of Business	2a.	Mailing Address				4
21		26					\perp
Suite, Apt.		\vdash	Suite, Apt. #, etc.				5
City & State	<u> </u>	27	City & State			_	6
23	3	28	Ony a cuato				"
Zip	Country	120)	Zip	Co	ountry		8
24	25	29		30			-
	9. Name and Address of C	urrent Regis	tered Agent				10
, DICD	OF FDANK A				81	Name	
PIERCE, FRANK A. PO BOX 277 1482 MAIN ST.				82	Street Add	ress (
CHIPLEY FL 32428				92			
CHIP	PLEY FL 32428				83		
					84	City	

FILED Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90114 028 ***150.00



DO NOT WRITE IN THIS SPACE

 \Box

This corporation owes the current year Intangible

Date Incorporated or Qualifed

Certificate of Status Desired

Election Campaign Financing

Trust Fund Contribution

Personal Property Tax.

03/03/1983 FEI Number

59-2387276

Signature, layed or printed name of registered agent and title if appricable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PDV PIERCE, FRANK A PI	Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent				
PO BOX 277 1482 MAIN ST. CHIPLEY FL 32428 84 Set City FL 85 Size Address (P.O. Box Number is Not Acceptable) 85 Set City FL 85 Size Code 11. Pursuant to the provisions of Sections 807,0502 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 thereby accept the appointment as registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I thereby accept the appointment as registered office or registered agent agent and accept the obligations of, decision 607,1508, Florida Statutes, the above-named corporation's board of directors. I thereby accept the appointment as registered office or registered agent signature magnetic details. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. STREET ADDRESS OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGES TO OFFIC	PIED	CE FRANK A	81	Name				
CHIPLEY FL 32428 83 84 City FL 85 Zip Code T1. 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 Statio of Florida, Such designed agent, and accept the obligations of, Section 607.0508, Florida Statutes. SIGNATURE T2. OFFICERS AND DIRECTORS T3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS T1. TITLE T2. OFFICERS AND DIRECTORS T3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE T2. OFFICERS AND DIRECTORS T3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE T2. OFFICERS AND DIRECTORS T3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE T2. OFFICERS AND DIRECTORS IN 13. STREET ADDRESS T3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE T2. OFFICERS AND DIRECTORS IN 12. TITLE T3. ADDITIONS/CHANGES IN 12. TITLE T2. OFFICERS AND DIRECTORS IN 12. TITLE T2. OFFICERS AND DIRECT				Street	Address (P.O. Box Number is Not Acceptable)			
11. Pursuant to the provisions of Sections 607 (502 and 607 1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607 (0505, Florids Statutes.) SIGNATURE The companies of the purpose of changing its registered was authorized by the corporation's board of directors. I hereby accept the appointment as registered statutes. The companies of registered agent and disk if applicable. (IOTE: Registered Agents signature registered when releasteding) DATE			-					
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits his 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 The company of the composition of the composit	Onir	LET 12 32420	183	'				
T1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Findrida 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. Statutes agent, I am familiar with, and accept the deligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, Typed or protest name of registered agent and tible if applicable. NOTE: Registered Agent signature required when reintaliting) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PDV PIERCE, FRANK A 12 MAVE PIERCE, FRANK A 12 MAVE PIERCE, FRANK A 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11 TITLE VDS 13. STREET ADDRESS CHIPLEY, FL. 00000 14 CITY-ST-ZP TITLE VDS 14 CITY-ST-ZP TITLE DELETE 31 TITLE Change Addition Addition Addition PIERCE, FRANK B 4.3 STREET ADDRESS CITY-ST-ZP TITLE DELETE 3.3 STREET ADDRESS CITY-ST-ZP TITLE DELETE 5.1 TITLE Change Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE Change Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE CHANGE ADDRESS CITY-ST-ZP TITLE DELETE 5.1 TITLE Change Addition Addition ADDITIONS/CHANGES COMPANY STATE Change Addition Addition ADDITIONS/CHANGES COMPANY STATE Change Addition Addition ADDITIONS/CHANGES COMPANY STATE Change Addition ADDITIONS/CHANGES COMPANY STATE CHANGE ADDITIONS/CHANGES COMPANY STATE CHANGE ADDITIONS/CHANGES COMPANY STATE CHANGE ADDITIONS/CHANGES COMPANY STATE CHANGE ADDITIONS/CHANGES COMPANY STATE ADDITIONS/CHANGES COMPA			84	City	-	85 Zip C	ode	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's Doard of directors. I nerely accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607/5056, Florida Statute. Signature								
12.	office or re	egistered agent, or both, in the State of Florida. Such change was autho	orized by	the corpo	corporation submits this statement for the purpos- oration's board of directors. I hereby accept the a	e of changing its r ppointment as reg	egistered istered	
12.	SIGNATURE	Standburg typed or printed game of registered agent and title if applicable (NOTF: Ret	cistered Age	ent signature r	required when reinstating) DATI	€	\	
DELETE	12.	3,000				S AND DIRECTOR	RS IN 12	
HWY 77 S	TITLE	PDV DELETE	1.1 TITLE			☐ Change	☐ Addition	
CHY-ST-ZIP	NAME.	PIERCE, FRANK A	1.2 NAME				}	
TITLE	STREET ADDRESS	HWY 77 S	1.3 STREE	TADORESS		•		
NAME	CTTY-ST-ZIP	CHIPLEY, FL 00000	1.4 CITY-5	ST-ZIP				
STREET ADDRESS CHIPLEY, FL 00000	TITLE	VDS DELETE	2.1 TITLE			☐ Change	Addition	
CHIPLEY, FL 00000 2.4 CITY-ST-ZIP	NAME	YATES, WILLIAM E	2.2 NAME				ĺ	
TITLE	STREET ADDRESS	HWY 90 E	2.3 STREE	T ADDRESS			1	
NAME	CITY-ST-ZIP	CHIPLEY, FL 00000	2. 4 CITY-	ST-ZIP	<u> </u>			
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GHT-51-ZF	STREET ADDRESS		6.3 STRES	ET ADDRESS			1	
	CITY-ST-ZIP				Florida Challes Challe		fermation	

I nereby 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 of true exemption at the true and that my name appears in Block 12 or Block 13 if changed or an attachment with a address, with a other like empowered.

SIGNATURE: