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PROFIT[®] **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Mar 31, 1999 8:00 am Secretary of State

03-31-1999 90045 035 ***150.00

1. Corporation	MENT # G63651					
i. Corporatio	ANCE M. GOODWILLIE, INC.					
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Principal Plac	e of Business	Mailing Address			DII MIDIE BIDEI DIDIE DI	ANT NINI TOUR
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STE 502		STE 502				
BELLEAIR FL 3	3756	BELLEAIR FL 33756 US		DO NOT WRITE IN T	HIS SPACE	
uo		03		3. Date Incorporated or Qualifed 10/05/1983		
2 Principal F	Place of Business	2a. Mailing Address		4. FEI Number	And	plied For
21		26		59-2339308	 -	t Applicable
Suite, Apt.	#, etc. ·	Suite, Apt. #, etc.			\$8.75 A	
22		27	و • سه.	5. Certificate of Status Desired	Fee Red	quired
City & Sta	te	City & State		6. Election Campaign Financing	\$5.00	May Be
23		28		Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible	D⊒r√s₀
24	9. Name and Address of Curren		30	Personal Property Tax. 10. Name and Address of New Register		LIMINO
 -	9. Name and Address of Curren	r Kadistalad Adaur	81 Name	10. Name and Address of New Register	ed Agent	$\overline{\mathcal{M}}$
G00	DOWILLIE, CONSTANCE M.			roodwillie, LOXST	INCE,	1
	ELLEVIEW BLVD. #408		82 Street Add	dress (P.O. Box Number is Not Acceptable)	502	
BELI	LEAIR FL 33756		83	JESSIAE PARE		
			Be	2//eair		
			84 City	· ·	85 Zip C	ode , /
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11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	the above named cor	moration submits this statement for the nurnes	L 33	756 registered
office or i	registered agent, or both, in the State	of Florida. Such change was aut	s, the above-named controlled by the corporat		L 33	756 registered gistered
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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 charged, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

is a militar

STREET ADDRESS