FILE NOW: FILING FEE AFTER MAY 1ST 13 \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # G68823

1. Corporation Name

Principal P ace of Business

EXCLUSIVE SEARCH, INC.

| FILED |
|--------------------------------|
| Apr 26, 1999 8:00 am |
| |
| Secretary of State |
| 04-26-1999 90288 006 ***150 00 |



| 356 BLANDING BLVD P.O.BOX 1424 ORANGE PARK FL 32073 US | | P. O. BOX 1424 P.O.BOX 1424 ORANGE PARK FL 32067-1424 US | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/14/1983 | | | | |
|--|--------------------|---|--------------------|--|---|---------------------------|--------------|--|
| 2. Principal Place of Business 2a. Mailing Address | | | | | 4. FEI Number | Ар | lied For | |
| 21 | | 26 | – | | 59-2336419 | | t Applicable | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. 27 | | | | | 5. Certifcate of Status Desired | \$8.75 A Fee Re | | |
| City & State 28 | | City & State | ¬ ' | | 6. Electic n Campaign Financing Trust Fund Contribution | \$5.00 Added t | , | |
| Zip | Country 25 | Zip Cot 29 30 | | / | This corporation owes the current year leading Personal Property Tax. | ntangible Yes | □No | |
| 9. Name and Address of Current Registered Agent | | | | | 10. Name and Address of New Registered Agent | | | |
| HORN, BARARA K 356 BLANDING BLVD. | | | | 81 Name | | | | |
| | | | | <u> </u> | dress (P.O. Box Number is Not Acceptable) | | | |
| ORANGE PK FL 32073 | | | 83 | | | | | |
| | | | 84 | 1 | F | - ' ' | | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named exporation 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 | | and tills if analysishing (NOTE) | Pageterad Ans | nt signature reg u | red when reinstating DATE | | | |
| Signature, typed or printed ni me of registered agen and title if applicable. (NOTE. Reg 12. OFFICERS AND DIRECTORS | | | 13. | a signature req 2 | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO | RS IN 12 | |
| TITLE | DP | ☐ DELETE | 1.1 TITLE | | | Change | ☐ Addition | |
| NAME | HORN, BARBARA K. | | 1.2 NAME | | | | | |
| STREET ADOR: SS | 356 BLANDING BLVD. | | 1 3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | ORANGE PARK FL | | 1.4 CITY-ST-ZIP | | | | | |
| TITLE | DV | ☐ DELETE | 2.1 TITLE | | | ☐ Change | Addition | |
| NAME | HORN, RONALD W. | | 2.2 NAME | | | | | |
| STREET ADDRESS | 356 BLANDING BLVD. | | 2.3 STRE | | | | ! | |
| CITY-ST-ZIP | ORANGE PARK FL | | 2.4 CITY- | ST-ZIP | | | | |
| TITLE | | ☐ DELETE | 3.1 TITLE | | | Change | ☐ Addition | |
| NAM€ | | | 32 NAME | | | | | |
| STREET ADDRESS | | | 3.3 STREE | T ADDRESS | | | | |
| CITY-ST-ZIP | | | 3.4. CITY- | ST-ZIP | | Change | Addition | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | | Change | Addition | |
| NAME | | | 4. 2 NAME | | | | | |
| STREET ADDRESS | | | | T ADDRESS | | | ŀ | |
| CITY-ST-ZIP | | | 4.4 CITY-1 | ST-ZIP | | ☐ Change | Addition | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | | Change | L Addibon | |
| NAME | | | 5.2 NAME | TADDRESS | | | | |
| STREET ADDRESS | | | | TADDRESS | | | | |
| CITY-ST-ZIP | | C) DELETE | 5.4 CITY-: | 51-219 | | Change | Addition | |
| TITLÉ | | ☐ DELETE | 6.1 IIILE | | | | L Addition | |
| NAME | | | | | | | | |
| STREET ADDR ESS | | | | TADDRESS | | | | |
| CITY-ST-ZIP | | | 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 119.0 /(3)(i), Florida Statutes. I further certify that the ir formation 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 chapters, or on an attachment with an address, with all other like empowered.

Barbara K. Horn

904/276-1479