

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

FILED  
Feb 24, 1999 8:00 am  
Secretary of State

02-24-1999 90115 013 \*\*\*150.00

DOCUMENT # G83961

1. Corporation Name

JUANITA R. TAYLOR, PROFESSIONAL ASSOCIATION

Principal Place of Business

15315 N.W. 60TH AVENUE, SUITE #A  
MIAMI LAKES FL 33014

Mailing Address

15315 N.W. 60TH AVENUE, SUITE #A  
MIAMI LAKES FL 33014

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/09/1984

4. FEI Number

59-2390801

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

Yes ☐ No ☒

2. Principal Place of Business

2a. Mailing Address

21 2401 Roberts Drive

26 2401 Roberts Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Niceville, FL

28 Niceville, FL

Zip

Country

Zip

Country

24 32578

25 USA

29 32578

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TAYLOR, JUANITA R.  
7282 JACARANDA LANE  
MIAMI LAKES FL 33014

81 Name

JUANITA R. TAYLOR

82 Street Address (P.O. Box Number is Not Acceptable)

2401 ROBERTS DRIVE

83

84 City

NICEVILLE

FL

85 Zip Code

32578

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

*Juanita R. Taylor*

Juanita R. Taylor

1/10/99

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME D  
STREET ADDRESS TAYLOR, JUANITA R.  
CITY-ST-ZIP 7282 JACARANDA LANE  
MIAMI LAKES FL

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME D.  
1.3 STREET ADDRESS JUANITA R. TAYLOR  
1.4 CITY-ST-ZIP 2401 ROBERTS DRIVE  
NICEVILLE, FL 32578

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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 119.07(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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

*Juanita R. Taylor*

Juanita R. Taylor

Date

1/10/99

Daytime Phone #

850-678-9058

CR2E034 (11/98)

0131521