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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPAFITMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS FILED Apr 26, 1999 8:00 am Secretary of State 04-26-1999 90284 048 ***150.00

DOCUMENT # H42841

EAST FOURTH STREET PROPERTIES, INC.

Principal Place	of Business	Mailing Address			
3185 CONWAY RD		3185 CONWAY RD			
STE. E STE. E					DO NOT MIDITE IN THIS SPACE
ORLANDO FL 32812		ORLANDO FL 32812 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed
US .		uo			02/15/1985
5-1-1-1 0	of Dii	2a Mailing Address			4 FEI Number Applied For
2. Principal Place of Business		H=1" -			37-5400602 Not Applicable
21 Suite, Art. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
_	#, etc.	27			5 Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing 55.00 Nay Be
—	-	28			Trust F and Contribution Added to Fees
Zip Coun'ry		Zip Country			8. This corporation owes the current year Fitangible
_	, 25	29 3	¬ ´		Personal Property Tax.
24	9. Name and Address of Current		<u> </u>		10. Name and Address of New Registere 1 Agent
			81	Name	0 1 B B
BUTLER, C. VICTOR, JR.				_ <u></u>	gela (Dekle
1218 E. ROBINSON ST.			82	Street Add	dress (P.O. Box Nymber is Not Acceptable)
ORL	ANDO FL 32801		83	1071	1 1000%
			84	City	Trecul-nod FL 85 Zip Code 32 > 57>
Durant to the provisions of Continue 607 0502 and 607 1508. Florida Statulas the above-ha				e-named corr	progration submits this statement for the purpose of changing its ragistered
11. Pursuant to the provisions of Sc ctions 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 cirectors. I hereby accept the appointment as registered					
agent. I am familiar with, and bi cept the only still ans of Section 607.0505, Florida Statutes.					2 hulac
SIGNATURE	Signature, broad or printed name of registered agent	er L		t oleratura rom m	red when reinstating) DATE
40	OFFICERS ANI		13.	it algridators root in	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12. TILE	VD	DELETE	11 TITLE		Change Addition
NAME	PLANTE, GEORGE		1.2 NAME	- 1	
	1102 WINTER SPRINGS BLVD		13 STREE	ADDRESS	
STREET ADDRESS	WINTER SPRINGS FL		14 CITY-S	ļ	
CITY-ST-ZIP		☐ DELETE	2.1 TITLE	1-ZIP	☐ Change ☐ Addition
TITLE	SD DIANTE LOIS		2.2 NAME	1	· ·
NAME	PLANTE, LOIS			- ADDDCCC	
STREET ADORESS	1102 WINTER SPRINGS BLVD		2.3 STREET		
CITY-ST-ZIP	WINTER SPRINGS FL	☐ DELETE	2.4 CITY-5 3.1 TITLE		☐ Change ☐ Addition
TITLE	BECKED DVAID B		ł	}	
NAME	BECKER, DAVID R.		3.2 NAME	F 4000000	
STREET ADDRESS	1847 NORTH ST.		E .	TADDRESS	
CITY-ST-ZIP	LONGWOOD FL	□ DELETE	3.4 CITY-S 4.1 TITLE	11-ZIP	☐ Change ☐ Addition
TITLE	TD ANCELAE		2	ł	
NAME	BECKER, ANGELA E.		4.2 NAME		
STREET ADDR :SS	1847 NORTH ST.			TADDRESS	
CITY-ST-ZIP	LONGWOOD FL	FT) no oto	4.4 CITY-S	I-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME	1	
NAME			4	TADDRESS	
STREET ADDRESS				TADDRESS	
CITY-ST-ZIP		C or ere	5.4 CITY-S 6.1 TITLE	I-ZIP	☐ Change ☐ Addition
TTLE		☐ DELETE	6.2 NAME	1	Onlange Modulor
NAME					
STREET ADDRESS			6.3 STREE	T ADDRESS	

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 ander oath; that am an office 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

6.4 CITY-ST-ZIP

SIGNATURE:

Daytime Phone #

CR2E034 (11/98)